

## 200 CHILD PROTECTIVE SERVICES

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## 200.2 Philosophy Of Child Protective Services Investigations

Child and Family Services works to ensure that children in Utah live in safe, permanent homes. Child Protective Services (CPS) is our first step toward ensuring protection and permanency for children. The Child and Family Services CPS caseworker's ability to assess the child's vulnerabilities, the threats of harm, and the caregiver's protective capacities will set the direction for all other services offered by Child and Family Services. Child and Family Services caseworkers recognize that parents have the right, obligation, responsibility, and authority to raise, manage, train, educate, provide for, and reasonably discipline their children. We also recognize that removal affects these rights, creating a long-term impact on a child. Our caseworkers are dedicated to maintaining children with their family when circumstances and services can increase the protective capacities, and reduce the threats of harm and the child's vulnerabilities so the child can remain at home. Our caseworkers also take into account the extent to which the child's extended family may provide needed protection. Through the use of these major objectives and procedures, CPS caseworkers focus on five basic tasks in their daily work:

- A. What must I do to mitigate the immediate threats of safety and reduce the future risks of harm given the child's vulnerabilities? How can I increase the protective capacities so that the child remains safe?
- B. How do I engage the child and family in a way that will allow me to understand the child and family's needs and challenges beyond just those identified on the CPS case and provide enduring safety and permanence for the child?
- C. How do I develop a trusting relationship with the family that will facilitate their use of community resources?
- D. How do I assist the family in identifying its strengths, including those within the extended family, which will increase the possibility of the child remaining at home or returning home quickly?
- E. How can I ensure a smooth transition for the family from the CPS case to ongoing services?

These questions help CPS caseworkers tie the Practice Model major objectives into CPS major objectives and procedures, guiding the actions of caseworkers throughout all CPS cases.

## 201 A Call For Help: A Community And State Collaborative Effort

This section contains the major objectives and procedures that CPS caseworkers need to receive, document, and categorize reports of child abuse, neglect, or dependency.

### 201.1 Intake

#### Major objectives:

Child and Family Services will maintain a child welfare management information system (SAFE) for receiving referrals or reports about child abuse, neglect, or dependency when there is reasonable cause to believe that abuse, neglect, or dependency occurred.

#### **Applicable Law**

Utah Code Ann. [§62A-4a-501](#). Harboring a runaway – Reporting requirements – Division to provide assistance – Affirmative defense – Providing shelter after notice.  
Utah Code Ann. [§62A-4a-1003](#). Management Information System – Requirements – Contents – Purpose -- Access.  
Administrative Rule [R512-200](#). Child Protective Services, Intake Services.

#### Practice Guidelines

SAFE will supply the CPS caseworkers with a complete history for each child, including siblings, foster care episodes, all reports of abuse, neglect, or dependency, treatment plans, and casework deadlines.

If Child and Family Services receives a report concerning a runaway child, the Intake worker will gather information to determine if there is an allegation of abuse, neglect, or dependency that requires a CPS referral or refer the caller to contact the Youth Services Agency.

### 201.2 Receiving And Researching The Referral

#### Major objectives:

Each call received by Child and Family Services regarding the safety and protection of a child will be considered a potential referral and will be documented by Intake in SAFE. The Intake worker will research all available additional sources to gather more pertinent complete information to help establish the validity, credibility, necessity, and priority of the referral information.

#### **Applicable Law**

Utah Code Ann. [§62A-4a-409](#). Investigation by division -- Temporary protective custody -- Preremoval interviews of children.

Practice Guidelines

The minimum required information for a referral in any form (e.g., fax, letter, or email) should include:

- A. A narrative description of a specific occurrence or allegation of abuse, neglect, or dependency, which falls into at least one of the defined categories in Major objectives [Section 201.11](#).
- B. A means of identifying an alleged victim under the age of 18 years for each allegation. If the reported concerns involve an unborn child and there are no threats of harm to other children in the home, a child must be born before a case can be opened.
- C. A means of locating (address or contact person) the alleged victim.
- D. Every referral requires a query of SAFE and EREP.
- E. Where possible, the following information is preferred in addition to the minimum required information:
  1. Where the abuse, neglect, or dependency occurred.
  2. When the incident occurred.
  3. Any witness to the incident.
  4. Physical evidence.
  5. Alleged victim name, address, phone number, birth date, and primary language.
  6. Parent name, address, phone number, birth date, and primary language of alleged victim.
  7. Alleged perpetrator name, address, phone number, and birth date. Include sex offender registry information if the allegations are related to Sexual Abuse.
  8. Referent name, address, and phone number.
  9. Every known member of the alleged victim's immediate family/household. All siblings should be identified on the referral, regardless of whether or not they reside in the same home as the alleged victim.
  10. Accessibility of the alleged perpetrator to the alleged victim.
  11. School/child care information for the alleged victim and where the alleged victim can be located.
  12. Employment information and schedule for the parents.
  13. How the referent obtained the information regarding the allegation.
  14. Willingness of the referent to testify.

15. Special circumstances/precautions recommended for investigation, including adopted children who may need services.
16. Third-party/collateral contacts.
17. History or occurrence of domestic violence.
18. The threats of harm, child vulnerabilities, and protective capacities.
19. Indicate whether or not the family has had prior Child and Family Services involvement. If there is currently an open case, document the type of service and the caseworker assigned.

### 201.3 Research Of Information

(THIS SECTION HAS BEEN COMBINED WITH [SECTION 201.2](#))

### 201.4 Disposition Of The Referral

#### Major objectives:

The CPS Intake process will be completed by or staffed with a licensed social worker, with the exception of "information only" contacts.

#### **Applicable Law**

Utah Code Ann. [§62A-4a-105](#). Division responsibilities.

#### Practice Guidelines

The CPS Intake process will consist of all actions taken by an Intake worker from the time contact is made with Child and Family Services until the information received is determined to be one of the following:

- A. Accepted referral: An accepted referral is one in which the minimum information required for a referral is obtained and opened for investigation. Law enforcement will be notified of accepted referrals.
- B. Unaccepted referral: A referral is unaccepted in situations including, but not limited to, any of the following:
  1. The child is not yet born.
  2. The minimum required information for accepting a referral is not available.
    - a. A narrative description of a specific occurrence or allegation of abuse, neglect, or dependency.
    - b. A means of identifying an alleged victim under the age of 18 years for each allegation, or to the age of 21 years if Child and Family Services has been assigned custody by a court.
    - c. A means of locating the alleged victim.
  3. The allegations do not amount to abuse or neglect.

4. As a result of research, the information is found not credible or reliable.
5. The specific incidence or allegation has been previously investigated and no new information is gathered.
6. The specific incidence occurred out of the geographic jurisdiction, and the referent was referred to the proper child welfare jurisdiction.

With respect to unaccepted referrals, the Intake worker may offer community resource information and/or referral information including, but not limited to, information about priority of treatment.

Information received in an unaccepted referral will still be documented, and this history can be used to establish a pattern of concern.

C. Additional information or allegation:

1. When there is an open CPS case involving children of the same household and/or who have the same parent or guardian, an additional information referral will be added to the open CPS case.
  - a. If the additional information meets the definition for an allegation not previously assigned to the open case, any new allegation(s), victim(s), and/or perpetrator(s) will be added to the CPS case by the Intake worker.
  - b. If the additional information referral meets the criteria for a Priority 1 or 2 response time:
    - (1) The Intake worker will call the worker assigned to the case. If the assigned worker does not respond, the Intake worker will call the worker's supervisor. If the worker's supervisor does not respond, the Intake worker will call the community services manager (CSM). If the CSM does not respond, the Intake worker will call the associate region director.
    - (2) If the call comes in after hours, the Intake worker will call the on-call worker to respond.
2. If the additional information involves victims and/or perpetrators not of the same household, where there is no blood or legal relation to any parties involved with the case, a new CPS case will be opened.

D. An "Information Only" contact is a call which does not meet the criteria of an Accepted, Unaccepted, or Additional Information referral. (Practice Guidelines [Section 201.4](#) A, B, and C.)

1. These calls will be documented by the Intake worker as an Information Only referral in SAFE and will include the duration of the call. The Information Only referral will be entered into SAFE immediately after the call is completed.



- E. Conflict of Interest and Related Parties Investigation cases:
1. A case that involves allegations of child abuse, neglect, or dependency of a child in state custody will be forwarded to the contracted independent CPS agency or individual regardless of whether or not the alleged perpetrator is the out-of-home caregiver (see Practice Guidelines [Section 207](#)).
  2. Where a Child and Family Services employee, volunteer, or contractor of the Department of Human Services (DHS) has a relationship with the alleged victim, alleged perpetrator, or another person named in the investigation such that there is or might be a conflict of interest, the appearance of a conflict of interest, impropriety, or the appearance of impropriety if CPS or Child and Family Services performed the investigation, will be forwarded to the Office of Services Review Related Parties Investigators (see Practice Guidelines [Section 207](#)).
- F. Licensed daycare provider: When the allegation involves a licensed daycare provider, the Intake worker will notify the Department of Health and document the name and phone number of the contact person in the narrative of the CANR.
- G. The Intake worker will call and email the region director and CC: the associate region director for referrals involving any of the following:
1. Domestic Violence homicide/suicide.
  2. Alleged abuse or neglect related child fatality/near fatality.
  3. Involves or is likely to involve the media.
  4. Any Conflict of Interest or Related Parties investigation involving the associate region director or region director's region.

## 201.5 Priority Of The Referral

### Major objectives:

The priority of the referral will be based upon the information received at Intake and will be determined prior to the face-to-face contact with a child. The priority determines the time allotted for Intake to complete the referral process and for the assigned CPS caseworker to make face-to-face contact with the child.

### **Applicable Law**

Administrative Rule [R512-200](#). Child Protective Services, Intake Services.

### Practice Guidelines

Child and Family Services will prioritize referrals as follows:

- A. A priority 1 response will be assigned only if there is an imminent threat to the safety and well-being of a child as determined by the Intake checklist. Do not use priority 1 when:
1. The police are present and able to provide protection to the alleged victim; or if
  2. The child is in a facility (such as a hospital) where it is reasonable to assume there are responsible adults providing protection and there are no immediate threats to the child's safety.
- Intake has no more than 30 minutes from the completion of the initial contact from the referent to gather additional information, staff the referral to determine the priority, notify law enforcement, and assign to the CPS caseworker. Intake will provide the CPS caseworker with information concerning prior investigations in SAFE. The CPS caseworker has a maximum of 60 minutes from the moment Intake notifies the caseworker to make the face-to-face contact with an alleged victim. For a priority 1R (rural) referral, a CPS caseworker has a maximum of three hours if the alleged victim is more than 40 miles from the investigator who is assigned to make the face-to-face contact.
- B. A priority 2 response will be assigned when the following conditions exist: the child is at risk of further abuse, neglect, or dependency, or the child has immediate protection and safety needs, as determined by the Intake checklist. Intake has no more than 60 minutes from the completion of the initial contact from the referent to gather additional information, staff the referral to determine the priority, assign the referral to the CPS caseworker, and notify law enforcement. Intake will give verbal notification to the assigned CPS caseworker. Intake will also provide the CPS caseworker with information concerning prior investigations on SAFE. The CPS caseworker has 24 hours from the moment Intake notifies the caseworker to make the face-to-face contact with the alleged victim. Intake may assign a priority 2 response with more urgent time frames when:
1. The police are present and there is an allegation of abuse, neglect, or dependency and they are asking for immediate assistance.
  2. The child is in a facility (such as a hospital or school) and there is an allegation of abuse or neglect that requires a more immediate response.
- C. A priority 3 response will be assigned when there is an allegation of abuse or neglect that does not require an immediate response as listed in [Section 201.5](#). The Intake worker has no more than 24 hours from the completion of the initial contact from the referent to gather additional information, research data sources, staff the referral as necessary, determine the priority, complete documentation including data entry, disposition to CPS, and notify law enforcement. The CPS

caseworker has until midnight of the third working day from the moment Intake assigns the case to make the face-to-face contact with the alleged victim.

D. Intake has until midnight of the fifth working day to enter unaccepted referrals into SAFE.

E. Intake has 24 hours to enter an additional information referral into SAFE.

## 201.6 Out-Of-State Abuse Or Neglect Report

### Major objectives:

Child and Family Services will take reasonable steps to ensure that reports of abuse or neglect are referred for investigation to the appropriate out-of-state agency and will take reasonable steps to adequately protect children in Utah who were victims of abuse in another state or country from the alleged perpetrator.

### **Applicable Law**

Utah Code Ann. [§62A-4a-105](#). Division responsibilities.

### Practice Guidelines

- A. When a referent identifies an incident of abuse or neglect that occurred in a different state, and the child is not in Utah at the time of the referral, the Intake worker will:
1. Inform the referent that the out-of-state allegations should be referred to the child welfare agency in the other state and complete the steps identified below:
    - a. Determine if the referent is willing to make a report to the child welfare agency in the state where the incident occurred. If the referent is willing to make a report, the Intake worker will also:
      - i. Assist the referent by providing the name and phone number of the agency where the report can be made;
      - ii. Document the unaccepted referral.
    - b. If the referent is unable or unwilling to make a report to the other state child welfare agency and it cannot be determined that any failure to protect or other child protection issues are present in the state of Utah, the Intake worker will:
      - i. Obtain all relevant information on the incident of abuse or neglect and make the referral to the child welfare agency in the state where the incident occurred;
      - ii. Document the unaccepted referral.

- B. When the referent identifies an incident of abuse or neglect that occurred outside Utah but the child is in Utah at the time of the referral, the CPS caseworker will:
1. Obtain all the information needed to complete a referral.
  2. Determine whether the child is at risk of abuse or neglect from the alleged perpetrator.
  3. Contact the child protective service agency in the state where the incident of abuse occurred and complete the referral process of that state.
  4. When requested by the other state assign the referral to a CPS caseworker for a courtesy interview and coordination with the other state's investigation. Courtesy interventions should be opened as an IHS case if there is no allegation of abuse, neglect, or dependency occurring in the state of Utah.
  5. In domestic violence related child abuse cases, recognize another state's protective order (recognized by full faith and credit).
  6. If the other state refuses to open an investigation and the child needs services or there are ongoing safety concerns, the referral will be assigned as an IHS case to facilitate an assessment of service needs.
- C. When a referent identifies an incident of abuse or neglect that occurred in Utah, and the child is not in Utah at the time of the referral, the Intake worker will:
1. Obtain all the information needed to complete a referral.
  2. Determine the location of the child and the length of time the child will be at their current location. If the child will be outside the state of Utah longer than 30 days, a request for courtesy casework will be made in the state where the child is currently located.
  3. If the child is determined to be at risk, a request will be made for courtesy casework within the Intake priority time frame. [See: [Section 201.5](#) for priority time frames.]

## 201.7 Case Assignment Based On Child Location

### Major objectives:

The Intake worker will assign the referral to the appropriate office/ supervisor/ worker for a CPS investigation within the established time frame. [See: [Section 201.5](#).]

### **Applicable Law**

Utah Code Ann. [§62A-4a-105](#). Division responsibilities.

### Practice Guidelines

- A. Child in a permanent location: The Child and Family Services office serving the geographical area in which a child is physically located will be responsible to

investigate an allegation of abuse, neglect, or dependency, unless the child's location is temporary (such as visitation with a non-custodial parent or placement in a short-term program).

- B. Child in a temporary location: If the child's location is temporary and the child will be moving to a known location during the 30-day investigative period, the Child and Family Services office serving the geographical area in which the child's parent or guardian resides will be responsible to complete the investigation. The CPS caseworker may request courtesy assistance from another CPS caseworker in the area where the child is initially located to complete the investigative functions related to the child. If a priority 1, 1R, or 2 referral is received in the geographical area where the child is located but the parent or guardian resides elsewhere, the receiving office will make the face-to-face contact, determine immediate protection needs, and transfer the case to the area where the child's parent or guardian resides for completion of the investigation.

## 201.8 Courtesy Casework Request From An Out-Of-State Agency

### Major objectives:

Child and Family Services will respond to requests from an out-of-state child welfare agency, law enforcement, or other official investigative agencies to assist in the protection of children.

### **Applicable Law**

Utah Code Ann. [§62A-4a-105](#). Division responsibilities.

### Practice Guidelines

If a request is made for casework activities by an out-of-state child welfare agency, law enforcement, or other official investigative agency, Intake will process the request by complying with relevant Utah Child and Family Services major objectives and completing the following:

- A. Intake will obtain the child's name, address, and all information relative to the request for courtesy casework activities.
- B. The courtesy casework activities requested will be assigned by Intake to the appropriate geographical Child and Family Services supervisor or caseworker.
- C. The case will be opened as an I HS case, and all courtesy casework activities will be documented.

## 201.9 Allegation Categories For Abuse, Neglect, Or Dependency

### Major objectives:

Child and Family Services will investigate an allegation of child abuse, neglect, or dependency when there is reasonable cause to suspect a situation of abuse, neglect, or dependency.

### **Applicable Law**

Utah Code Ann. [§62A-4a-409](#). Investigation by division -- Temporary protective custody -- Preremoval interviews of children.

Administrative Rule [R512-202](#). Child Protective Services, General Allegation Categories.

### Practice Guidelines

The Intake worker receiving a report of child abuse, neglect, or dependency will categorize the information into at least one of the following (more than one category may be documented, if applicable):

#### A. Abuse:

##### 1. Child endangerment:

- a. Cited DUIs with children in the vehicle.
- b. Homes where there are lab paraphernalia, chemicals for manufacturing of illegal drugs, access to illegal drugs, distribution of illegal drugs in the presence of a child, or loaded weapons in the reach of the child.
- c. Giving children illegal drugs or substances, alcohol, tobacco, or non-prescribed/not recommended medications for that child.
- d. Involving a child in the commission of crimes, such as shoplifting.

##### 2. Domestic violence related child abuse:

- a. Potential for or actual injury to a child during a domestic violence episode.
- b. Violent physical and/or verbal altercation between adults, witnessed by a child.

##### 3. Emotional abuse:

- a. Engaging in conduct or threatening a child with conduct that causes or can reasonably be expected to cause the child emotional harm. This includes, but is not limited to, demeaning or derogatory remarks that affect or can reasonably be expected to affect a child's development of self and social competence; or threatening harm, rejecting, isolating, terrorizing, ignoring, or corrupting the child.
- b. Emotional Abuse, Chronic: Engaging in conduct or threatening a child with conduct that causes or can reasonably be expected to

cause the child emotional harm. This includes, but is not limited to, demeaning or derogatory remarks that affect or can reasonably be expected to affect a child's development of self and social competence; or threatening harm, rejecting, isolating, terrorizing, ignoring, or corrupting the child. Is repeated or patterned abuse. (NOTE: Chronic abuse may be identified from the first referral.) [See: Utah Code Ann. [§62A-4a-101](#).]

- c. Emotional Abuse, Severe: Abuse that causes or threatens to cause serious harm to a child. Engaging in conduct or threatening a child with conduct that causes or can reasonably be expected to cause the child emotional harm. This includes, but is not limited to, demeaning or derogatory remarks that affect or can reasonably be expected to affect a child's development of self and social competence; or threatening harm, rejecting, isolating, terrorizing, ignoring, or corrupting the child. Severe abuse is defined in Utah Code Ann. [§78A-6-105](#).
- 4. Material harmful to a child.
- 5. Physical abuse:
  - a. Physical abuse, general, including (but not limited to):
    - i. Non-accidental injury to a child that may or may not be visible;
    - ii. Unexplained injuries to an infant or toddler;
    - iii. Unexplained injuries to a disabled or non-verbal child.
- 6. Physical abuse, serious:
  - a. Non-accidental physical injury or a set of injuries, which may or may not be visible, that seriously impairs the child's health, or which involves physical torture or causes serious emotional harm to the child, or which involves a substantial risk of death [see: Utah Code Ann. [§76-5-109](#), including:
    - i. Fracture of any bone or bones;
    - ii. Intracranial bleeding, swelling, or contusion of the brain, or retinal hemorrhaging, whether caused by blows, shaking, or causing the child's head to impact with an object or surface (such as Shaken Baby Syndrome);
    - iii. A burn, including burns inflicted by hot water or those caused by placing a hot object upon the skin or body of the child;
    - iv. An injury caused by use of a deadly or dangerous weapon;
    - v. A combination of two or more physical injuries inflicted by the same person, either at the same time or on different occasions;
    - vi. Damage to internal organs of the body;



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- 593                               vii.     Conduct toward a child that results in severe emotional harm,  
594                               severe developmental delay or retardation, or severe  
595                               impairment of the child's ability to function;  
596                               viii.    An injury that creates a permanent disfigurement or  
597                               protracted loss or impairment of the function of a bodily  
598                               member, limb, or organ;  
599                               ix.     Conduct that causes a child to cease breathing, even if  
600                               resuscitation is successful following the conduct;  
601                               x.     Conduct that results in starvation or malnutrition that  
602                               jeopardizes the child's life.
- 603       7.     Fetal exposure to alcohol or other substances.  
604       8.     Fetal addiction to alcohol or other harmful substances.  
605       9.     Pediatric Condition Falsification (formerly known as Munchausen  
606       Syndrome by Proxy).  
607       10.    Ritual abuse:  
608            a.     Abuse involving the use of ceremonies or rites:  
609                  i.     Severe physical abuse such as torture;  
610                  ii.    Painful, sadistic, humiliating sexual abuse;  
611                  iii.   Psychological abuse such as indoctrination using mind  
612                       control techniques and mind altering drugs, or use of  
613                       intimidation and terrorization.
- 614       11.   Sexual abuse:  
615            a.     Incest;  
616            b.     Molestation;  
617            c.     Sexual intercourse;  
618            d.     Sodomy;  
619            e.     Oral sexual contact;  
620            f.     Digital and/or object penetration;  
621            g.     Indecent liberties;  
622            h.     Sexual acts;  
623            i.     Rape and object rape of a child;  
624            j.     Forcing or coercing a child to observe sexual activities;  
625            k.     Sexual acts with animals;  
626            l.     Forcing or coercing a child to engage in sexual activity with an adult  
627                       with or without legal marriage.
- 628       12.   Lewdness.  
629       13.   Sexual exploitation of a child, including (but not limited to) prostitution and  
630       pornography.
- 631   B.   Neglect:  
632       1.   Medical neglect/PKU: This allegation or finding needs to be based on the  
633       opinion of the child's primary care physician or other licensed medical  
634



professional. A parent or guardian may obtain a second opinion to be considered in determining medical neglect, at his or her own expense. A parent or guardian may obtain a second medical opinion to present for consideration by Child and Family Services, but Child and Family Services is not bound by the opinion and will consider the totality of the facts.

2. Baby Doe (congenital birth defect that parents or caregiver declines to treat).
3. Failure to thrive.
4. Physical health.
5. Psychological health.
6. Dental health.
7. Pediatric Condition Falsification (formerly known as Munchausen Syndrome by Proxy).
8. Physical neglect.
  - a. An adopted child whose parents can no longer care for and/or meet the needs of the child should be opened as Dependency . (The CPS caseworker will assess during the investigation whether the allegations of neglect should be added to the Child Abuse Neglect Report.)
9. Neglect chronic/severe.
10. Sibling or child at risk.
  - a. When information is received regarding a child fatality resulting from abuse or neglect or where the cause of death is undetermined, Intake will accept a referral for CPS investigation. The referral should include any siblings/children who were under the care of the same caregivers at the time of the child's death.
  - b. If there is information and/or indications that the safety or health of other siblings/children in the home is threatened, the referral will include all these children as well as the primary victim.
11. Educational neglect.
12. Failure to protect.
13. Non-supervision.
14. Abandonment.
15. Environmental neglect: Physical neglect of the environment that poses a threat to the physical health or safety of the child.
  - a. Assessment considerations: An assessment of the situation is required to determine whether intervention is necessary. After gathering all information possible, the Intake worker will consider the following to determine whether there are safety concerns that meet allegation definitions:
    - i. The age of the child;
    - ii. The developmental level of the child;

- iii. The medical condition of the child;
- iv. Duration or length of the situation (chronic);
- v. Volume or quantity or toxicity of the hazard;
- vi. Severity of the threat to the child;
- vii. Child's access to the hazards;
- viii. Level of parental involvement and protective capacities;
- ix. Other expert opinions to access (health department, pharmacist, doctor, zoning, fire department, etc.) .
- b. The CPS caseworker will assess whether the information infers that the environment is a threat of harm to the child's physical health, safety, or well-being, or whether a referral to community services is more applicable. Service and repair resources and/or on-site assessment contacts may include (but are not limited to) the following:

Concerns	Agency/Resources	Assessment, Education, or Services
Pest infestation, sewage/ water issues, urine/ feces	Health Department	Pest infestation, repair/ cleanup/ health
Heat issues, safe heat sources, carbon monoxide	Gas Company	Gas/ carbon monoxide issues, HEAT program assistance
Fire/ electrical dangers	Fire Department	Fire/ electrical dangers and safety code
Sewage/ water issues, lack of access to water	Water Department	Water/ sewage issues
Issues that exacerbate medical conditions (mold, smoke, effects of dangers/ hygiene on medical condition)	Physician or Medical Assistance	Environmental impact on medical condition
Lack of access to food	Food Assistance Program	Subsidizing or providing education on food and nutrition
Poisonous/ toxic chemicals	Poison Control	Exposure to toxic/ poisonous chemicals
Only spoiled foods are available, choking hazards, hygiene, nurturing, housecleaning issues	Parent Education and Advocacy	Safe and healthy parenting
Health and safety issues regarding animals or dangerous animal issues	Animal Control	Containment of excessive or dangerous animals
Drugs, paraphernalia, drug	Law Enforcement	Cleanup of drugs, drug labs, or

Concerns	Agency/Resources	Assessment, Education, or Services
labs		paraphernalia
Access to firearms/ ammunition, danger of firearms issues	Firearm Safety Education	Firearm safety
Dangerous structural issues, construction, code violations	Health Department and Zoning	Dangerous structural, construction, code violation
Cleanup assistance, respite, safety plan monitoring, provisions, financial assistance	Kin, church, neighbors, crisis nursery, or other community agencies	Formal and informal supports

The CPS caseworker may find services and/or agencies by calling 211 or accessing the Utah Cares website at <http://www.utahcares.utah.gov/>.

- C. Dependency: A child who is homeless or without proper care through no fault of the child's parent, guardian, or custodian; institutionalization of a parent or guardian who has not or cannot arrange for safe and appropriate care for the child.
1. An example is an adopted child whose parents are requesting services and/or intervention.
- D. Court ordered: Referral made by a court order mandating a Child and Family Services investigation on a case where no other allegation is specified. A case finding of supported cannot be made on an unknown allegation. The worker must specify another category of abuse, neglect, or dependency to make a supported finding. (See: [Section 202.10](#).)
- E. Safe Relinquishment of a Newborn Child: A parent or a parent's designee may safely relinquish a newborn child at a hospital in accordance with the requirements of Utah Code Ann. [§62A-4a-802](#) and retain complete anonymity, as long as the child has not been subjected to abuse or neglect. Safe relinquishment of a newborn child, who has not otherwise been subjected to abuse or neglect, will not, in and of itself, constitute neglect (Utah Code Ann. [§78A-6-105](#)), and the child will not be considered a neglected child as long as the relinquishment has been made in substantial compliance with the guidelines of that section, which provides that: (a) a newborn child is defined by the statute as a child who is approximately 72 hours of age or younger, as determined within a reasonable degree of medical certainty; and (b) the child is to be relinquished at a general acute hospital [defined in Utah Code Ann. [§26-21-2](#)], which is equipped with an

emergency room, is open 24 hours a day and seven days a week, and employs full time health care professionals who have emergency medical services training.

Statutory responsibilities of Child and Family Services following the safe relinquishment of a newborn child are as follows: Immediately upon notice from the hospital, Child and Family Services will assume care and custody of a relinquished newborn child.

1. As long as Child and Family Services determines there is no abuse or neglect of the newborn child, neither the newborn child nor the child's parents are to be subjected to the provisions of Utah Code Ann., Part 2 of [§62A-4a](#), the investigation provisions contained in Utah Code Ann. [§62A-4a-409](#), or the provisions of Utah Code Ann. [§78A-6](#), Part 3.
2. Unless identifying information relating to the non-relinquishing parent of the newborn child has been provided, Child and Family Services will work with local law enforcement and the Bureau of Criminal Identification within the Department of Public Safety in an effort to ensure that the newborn child has not been identified as a missing child.
3. Unless identifying information relating to the non-relinquishing parent of the newborn child has been provided, Child and Family Services will immediately place or contract for placement of the newborn child in a potential adoptive home and, within 10 days after receipt of the child, file a petition for termination of parental rights. [See: Utah Code Ann. [§78A-6](#), Part 4.]
4. Unless identifying information relating to the non-relinquishing parent of the newborn child has been provided, Child and Family Services will direct the Office of Vital Records and Statistics to: (1) conduct a search for a birth certificate for the child; and (2) conduct an Initiation of Proceedings to Establish Paternity Registry for unmarried biological fathers. Child and Family Services will then provide notice to each potential father identified on the registry. Notice of termination of parental rights proceedings will be provided in the same manner as is utilized for any other termination proceeding in which the identity of the child's parents is unknown.
5. If no person has affirmatively identified himself within two weeks after notice is complete and established paternity by scientific testing within as expeditious a time frame as practicable, a hearing on the petition for termination of parental rights will be scheduled.
6. If a non-relinquishing parent is not identified, relinquishment of a newborn child will be considered grounds for termination of parental rights of both the relinquishing and non-relinquishing parents under Utah Code Ann. [§78A-6-507](#).

## 201.10 Missed Priority Time Frames

### Major objectives:

The appropriate Missed Priority Time Frame form/SAFE documentation will be completed when the Intake worker is unable to meet Intake priority time frames established by major objectives. The Intake worker will forward the Missed Priority Time Frame form or documentation along with the reasons the time frame was missed to the Intake supervisor, region director, or designee for review and approval. The approval or non-approval will be documented.

### **Applicable Law**

Utah Code Ann. [§62A-4a-105](#). Division responsibilities.

### Practice Guidelines

The Intake worker will notify the Intake supervisor and region director or designee of the missed priority and the reason it was missed.

## 201.11 Referral Of Abuse, Neglect, Or Dependency In Licensed Child Care Providers And Out-Of-Home Care Providers

### Major objectives:

The Department of Health Child Care Licensing unit and/or the Department of Human Services (DHS) Office of Licensing and appropriate Child and Family Services staff will be notified by Intake when Child and Family Services receives a referral for an allegation of child abuse, neglect, or dependency against a licensed child care provider or out-of-home care provider. The referral will be forwarded to the contract entity for conflict of interest investigations when the allegation involves a child living in substitute care while in protective custody or temporary custody of Child and Family Services and may be forwarded to the contract entity for conflict of interest investigations when the allegation involves a biological or adopted child of a Child and Family Services employee/provider.

### **Applicable Law**

Utah Code Ann. [§62A-4a-409](#). Investigation by division -- Temporary protective custody -- Preremoval interviews of children.

### Practice Guidelines

A. Intake procedure for child care providers: CPS investigation requirements for child care providers will be the same as for other referrals investigated by Child and Family Services. Time frames are the same as for other referrals.

B. Intake procedure for Out-of-Home Care Related Parties Investigations:

1. Upon receipt of an allegation of child abuse, neglect, or dependency, Intake workers will staff the referral with the Office of Services Review (OSR) manager to determine whether there is a conflict of interest. The OSR manager will determine whether there is a conflict of interest and will notify the CPS Intake worker of the decision.. The following duties are to remain the duties of Intake:
  - a. Receipt of the referral.
  - b. Research.
  - c. Disposition of the referral.
  - d. Establish priority of the referral.
  - e. Establish allegation categories.
    - i. An adopted child in need of services that cannot be met by their parents will be categorized as Dependency. The CPS caseworker will assess during the investigation whether the circumstances require allegations of abuse or neglect to be added to the Child Abuse Neglect Report.
  - f. SAFE forms for child abuse, neglect, or dependency reporting, including any forms relating to out-of-home abuse.
  - g. Intake Checklist.
  - h. Authorization to Furnish Information and Release from Liability form (between Child and Family Services and the contract investigator).
  - i. Mandatory report form to local law enforcement.
  - j. Notify the DHS Office of Licensing.
  - k. CPS caseworkers with children placed in the provider's home.
2. Case assignment, when a contracted Related Parties investigator is not involved:
  - a. Notify the law enforcement agency in the area where the incident occurred and request assistance with the investigation; if the law enforcement agency agrees to assist with the investigation, the referral will be assigned according to Major objectives [Section 201.8](#), either to the area in which the child is located if the child is in a permanent location (permanent location being that the child is expected to remain at the current location for at least the next 30 days) or to the area in which the child's parent or guardian resides if the child is in a temporary location; if the alleged victim is a child in foster care, the CPS caseworker is considered the guardian.
  - b. The CPS caseworker assigned to the case will then coordinate with the law enforcement agency to complete the investigation as defined in Major objectives [Section 201.8](#); the only exceptions to the above procedures are referrals with allegations of sexual abuse,

which are always assigned to the area that the incident occurred if known.

c. If the law enforcement agency refuses for any reason to assist in the investigation, Intake will contact another region in order that the referral be assigned for a Related Parties Investigation.

3. A Child and Family Services investigator may assist the Related Parties investigator as a secondary worker.

4. The Related Parties investigator will determine whether the allegations are supported, unsupported, without merit, or false. The Related Parties investigator will report the findings to the appropriate Child and Family Services employee to ensure that the findings are entered into the Licensing or Management Information System (SAFE) and that the appropriate Notices of Agency Action are issued.

5. Record-keeping: Intake will retain the original copy of all documentation gathered during the investigation, and will maintain those documents for case closure, unless otherwise directed by the OSR manager or investigator.

## **201.12 72-Hour Hold By A Physician**

(THIS SECTION HAS BEEN REPLACED BY [SECTION 205.5.](#))

## **201.13 Protocol For IHS Cases Involving Youth In Out-Of-Home Care Age 18 And Older Who Are Identified As Victims Of Abuse Or Neglect**

### Practice Guidelines

A. Case acceptance and assignment responsibilities:

1. Intake will report the case to Adult Protective Services (APS). If the case is accepted for investigation, an IHS case will not be opened by Child and Family Services. The Intake worker will provide APS with the out-of-home care caseworker's contact information for communication and coordination purposes.

2. If the case is not accepted by APS for investigation, an IHS case will be opened and assigned to a CPS caseworker. Intake will inform the associate region director of the IHS case. The associate region director will be responsible for case assignment of the IHS case to the appropriate CPS caseworker.

B. IHS assessment responsibilities:

1. The CPS caseworker will contact law enforcement to investigate in conjunction with the IHS assessment.



2. The CPS caseworker will inform the out-of-home care caseworker of the open IHS assessment. The CPS caseworker will communicate with the out-of-home care caseworker throughout the IHS assessment and coordinate with them when necessary. The CPS caseworker will inform the out-of-home care caseworker of any identified safety concerns as well as the outcome of their assessment.
3. The CPS caseworker will interview the foster child.
4. The CPS caseworker will interview the alleged perpetrator.
5. The CPS caseworker will interview any appropriate collateral contacts with information regarding the concerns.
6. The CPS caseworker will document all case activities in the IHS case and copy the information into the out-of-home care case prior to closing the IHS case.
7. If concerns are identified:
  - a. The Office of Licensing will be contacted by the CPS caseworker. They will also contact the region contract specialist and resource family consultant, if applicable.
  - b. The out-of-home care caseworker will make appropriate safety arrangements, placement changes, etc.

## 201.14 Human Trafficking Protocol

### Major objectives:

The purpose of the Human Trafficking protocol is to identify victims of Human Trafficking during a law enforcement investigation, refer the child to services or resources, and to track situations involving child victims of Human Trafficking.

### **Applicable Law**

Utah Code Ann. [§62A-4a-105](#). Division responsibilities.

Utah Code Ann. [§76-5-308](#). Human trafficking – Human smuggling.

### Practice Guidelines

#### A. Intake Screening:

1. Intake workers will ask the referring law enforcement officer questions to determine if the situation involves prostitution or sexual solicitation (Human Trafficking as defined in Utah Code Ann. [§76-5-308](#)).
2. Intake workers will check the Child and Family Services' SAFE database to verify whether law enforcement referred the child to Child and Family Services on a prior occasion for the child engaging in prostitution or sexual solicitation (Human Trafficking as defined in Utah Code Ann. [§76-5-308](#)).
3. Intake will provide this information to the law enforcement officer



- 925 4. Referrals involving a child who has been identified as a victim of Human  
926 Trafficking will be opened as an Independent Home Study (IHS) case and  
927 assigned to the appropriate region for response. The Human Trafficking  
928 case type will be selected for the purposes of assessing child safety and to  
929 ensure Human Trafficking cases are tracked appropriately.  
930

931 B. Caseworker Response:

- 932 1. The CPS caseworker will make contact with the biological parents and/or  
933 legal guardians within five business days.  
934 2. The CPS caseworker will participate in the law enforcement interview of  
935 the child whenever possible or appropriate.  
936 3. The CPS caseworker will offer resource information and additional services  
937 to the child victim.  
938 4. The IHS case will remain open for no more than 60 days, and all CPS  
939 caseworker activities will be documented.  
940 5. If at any time during the IHS case the CPS caseworker determines the  
941 identity of the Human Trafficking perpetrator or determines other abuse,  
942 neglect, or dependency has occurred, the caseworker will staff the case  
943 with Intake to determine whether or not a case will be opened as a CPS  
944 case.  
945

## 202 First Contact: Immediate Assessment And Safety

### 202.1 CPS Investigation And Assessment

#### Major objectives:

The CPS caseworker will assess the threats to safety and the risk of future harm in the context of child vulnerabilities, and protective capacities of the caregiver. Once contact has been made on a CPS case, the case cannot be reversed as unaccepted. All requirements must be completed for the case. The CPS caseworker will make a finding at case closure based on facts gathered during the investigation.

#### **Applicable Law**

Utah Code Ann. [§62A-4a-409](#). Investigation by division -- Temporary protective custody -- Preremoval interviews of children.

Administrative Rule [R512-201](#). Child Protective Services, Investigation Services.

#### Practice Guidelines

A. A CPS investigation will include (but is not limited to) the following:

1. Interviews.
2. Assessments, including the SDM Safety Assessment and the SDM Risk Assessment.
3. A home visit.
4. Team consultations/staffings.
5. Service coordination.
6. Additional Information report added to the case by Intake.
7. Documentation of all contacts and information received.
8. Case closure.

B. A CPS investigation cannot be reversed to unaccepted once contact has been made with anyone other than the referent on the case. Documentation must exist to show any involvement or contact by Child and Family Services.

## 202.2 CPS Investigation Of A Case Receiving Services From Child And Family Services

### Major objectives:

When Child and Family Services receives information regarding a new incident of abuse, neglect, or dependency on a family or child receiving ongoing services, a new referral will be generated and a CPS caseworker will conduct the investigation. The CPS caseworker and ongoing worker, **including post adoption**, will collaborate to ensure that the investigation is conducted in the best interest of the child.

The CPS caseworker will notify the Attorney General's Office and the Guardian ad Litem when the case is under the jurisdiction of the court.

### **Applicable Law**

Utah Code Ann. [§62A-4a-105](#). Division responsibilities.

### Practice Guidelines

1. The CPS caseworker may request that the ongoing caseworker complete some of the requirements of the investigation.
2. The CPS caseworker will notify the ongoing caseworker, AAG, and GAL at the conclusion of the case of any safety issues identified and of the case finding(s).

## 202.3 Review Of Prior Records

### Major objectives:

During the initial phase of the investigation, the CPS caseworker will review all relevant records that are maintained by Child and Family Services and, when possible, by any other agencies or individuals. This includes records on the child, alleged perpetrator, and all members of the household. The CPS caseworker will review the details of the prior Child and Family Services cases.

### **Applicable Law**

Utah Code Ann. [§62A-4a-202.3](#). Investigation -- Supported or unsupported reports -- Child in protective custody.

### Practice Guidelines

The CPS caseworker will review the following types of information, when applicable and available:

- A. Child and Family Services records.

- B. TANF records.
- C. Police and/or court reports, including those for domestic violence (e.g., incident, arrest, protective orders, correction records, etc.).
- D. Court records relating to custody and visitation.
- E. BCI/NCIC reports on the alleged perpetrator.
- F. School records.
- G. Medical records, including the child's primary care provider.
- H. Information as to the eligibility for or membership in a Native American tribe.
- I. Any other relevant records.

## 202.4 Priority Response Time And Face-To-Face Contact

### Major objectives:

The priority response time will be based upon the information received at Intake and determined prior to the face-to-face contact with a child. The priority determines the time allotted for the CPS caseworker to make face-to-face contact with the alleged victim, regardless of age. In cases involving multiple alleged victims, the allegation driving the highest priority determines the overall priority response time for the referral. The alleged victim with the highest priority allegation will be seen within the priority response time frame. All alleged victims on the case need to be seen during the initial period of the investigative time frame. The purpose of the face-to-face contact is to assess immediate protection and safety needs of the child.

### **Applicable Law**

Utah Code Ann. [§62A-4a-105](#). Division responsibilities.

### Practice Guidelines

- A. The priority response time for the face-to-face contact begins when Intake assigns the referral to the CPS caseworker. An investigative interview is not required at the initial contact.
  - 1. A priority 1 response will be assigned when the child is in need of immediate protection as determined by the Intake worker's review of the Intake Checklist:

- 
- 1058           a.     The CPS caseworker has a maximum of 60 minutes from the  
1059                     moment of notification by Intake to make the face-to-face contact  
1060                     with an alleged victim;  
1061           b.     In a priority 1R (rural), the CPS caseworker has a maximum of three  
1062                     hours to make the face-to-face contact if the alleged victim is more  
1063                     than 40 miles from the caseworker. The 40-mile factor must be  
1064                     documented.
- 1065       2.     A priority 2 response will be assigned when physical evidence is at risk of  
1066               being lost or the child is at risk of further abuse, neglect, or dependency,  
1067               but the child does not have immediate protection and safety needs, as  
1068               determined by the Intake worker's review of the Intake Checklist:
- 1069           a.     The CPS caseworker has a maximum of 24 hours from the moment  
1070                     of notification by Intake to make face-to-face contact with an  
1071                     alleged victim, and more urgent time frames may be assigned by  
1072                     Intake based on child safety circumstances;
- 1073           b.     Assignment to the CPS caseworker of a priority 2 referral that is  
1074                     received outside of normal working hours (8:00 a.m. to 5:00 p.m.)  
1075                     will occur by no later than 9:00 a.m. the following morning. This  
1076                     would include a referral of a drug-exposed newborn, as there may  
1077                     not be any immediate threats of harm while hospitalized, but the  
1078                     situation needs to be assessed prior to the child's release for child  
1079                     vulnerabilities and protective capacities of the caregiver to  
1080                     determine if any additional interventions are necessary.
- 1081       3.     A priority 3 response will be assigned when potential for further harm to  
1082               the child or the loss of physical evidence is low as determined by the  
1083               Intake worker's review of the Intake Checklist:
- 1084           a.     The CPS caseworker has until midnight of the third working day  
1085                     from the moment Intake assigns the case to complete the face-to-  
1086                     face contact with an alleged victim.
- 1087
- 1088   B.     A documented exception to meeting the priority response time frame for the  
1089             required face-to-face contact must be supported by documentation of substantial  
1090             efforts that include at least two of the following:
- 1091           1.     The CPS caseworker attempted to visit the child at school.  
1092           2.     There has been verification that the address is correct, and the CPS  
1093                     caseworker has made an attempt to visit the child at home.  
1094           3.     The CPS caseworker has made an attempt to make contact after traditional  
1095                     working hours or on the weekend.
- 1096
- 1097   Or one of the following:

- 
- 1098 1. Reliable collateral information is received that indicates that the family or  
1099 child is going to be gone for more than three working days (for example, on  
1100 vacation, camp, or relative visit).
- 1101 2. A determination is made that the child is in an alternative placement.
- 1102 3. Information received supports the need for joint law enforcement  
1103 intervention at the time of initial contact.
- 1104 4. The caregiver/parent is refusing to allow the CPS caseworker to have  
1105 contact with the child.
- 1106 a. The caseworker has contacted the police for assistance, but the  
1107 police have been unsuccessful in attempts to assist the caseworker  
1108 in seeing the child;
- 1109 b. The caseworker will staff the case with a supervisor then contact an  
1110 AAG to determine whether a warrant or petition can be obtained  
1111 with the information available.
- 1112
- 1113 C. The requirement of a face-to-face contact with the child is waived if the  
1114 supervisor agrees that one of the following circumstances exist:
- 1115 1. The only alleged victim is deceased.
- 1116 2. The parent/guardian refuses to allow face-to-face contact, and all of the  
1117 following apply:
- 1118 a. The caseworker has contacted the police for assistance, but the  
1119 police have been unsuccessful in attempts to access the child.
- 1120 b. The caseworker has contacted an Assistant Attorney General to  
1121 staff whether a warrant or petition can be obtained with the  
1122 information available, but it was determined that a warrant or  
1123 petition was not appropriate.
- 1124 3. The child is out of state and a request for courtesy casework is made and  
1125 declined by the out of state child welfare agency and law enforcement in  
1126 the area and/or the courtesy caseworker/officer cannot complete a face-  
1127 to-face contact.
- 1128 4. The child cannot be located despite reasonable efforts. Reasonable efforts  
1129 include (but are not limited to):
- 1130 a. Visiting the home at least twice at times other than normal business  
1131 hours.
- 1132 b. Contacting local schools for contact information.
- 1133 c. Contacting local and county law enforcement agencies for  
1134 additional contact information.
- 1135 d. Checking public assistance records for additional contact  
1136 information.
- 1137 e. Checking with the referent for additional contact information.
- 1138 f. Searching telephone directories (books and online) for additional  
1139 contact information.

- D. For all missed priority situations, the CPS caseworker will complete the missed priority form in SAFE for approval by the supervisor and region director and place it in the CPS case file.

## 202.4a Face-To-Face Requirement

### Major objectives:

The purpose of the initial face-to-face contact is to assess immediate protection and safety needs of the child. The CPS caseworker must gather enough information from the child, parents/guardians, and/or other collateral contacts to identify immediate threats to the safety of the child and what actions and/or interventions are necessary to protect the child from the identified threats.

### Practice Guidelines

- A. Non-verbal Children Under the Age of 5 Years: The CPS caseworker will assess any non-verbal child under the age of five years in conjunction with the person currently caring for the child. The assessment will include a review of the Centers for Disease Control (CDC) Developmental Milestone checklist, which corresponds with the current age of the child (<http://www.cdc.gov/ncbddd/actearly/milestones>).
1. The child must be awake for the CPS caseworker to satisfy the face-to-face requirement. This must be clearly documented.
  2. The CPS caseworker will observe and document any alleged injuries or other physical conditions (such as rashes) by following the Practice Guidelines for Visual Assessment of a Child ([Section 203.1b](#)).
  3. If developmental concerns are identified with children under 36 months of age and the case will not be supported, the CPS caseworker will provide the parents/guardians with information about Baby Watch Early Intervention Program (BWEIP).
- B. Verbal Children: The CPS caseworker will interview a verbal child at the time of the initial face-to-face contact whenever possible as outlined in Section 203.1 – Interviews. If an interview is not possible, the CPS caseworker will gather information from parents/guardians or other collateral contacts who would have sufficient information about the safety of the child.

## 202.5 Missed Priority Time Frames

### Major objectives:

The CPS caseworker is to complete appropriate documentation in SAFE and staff the case with a licensed caseworker when they are unable to make face-to-face contact with an alleged victim on the case within the priority time frame.

### **Applicable Law**

Utah Code Ann. [§62A-4a-105](#). Division responsibilities.

### Practice Guidelines

When priority response is missed, the CPS caseworker must complete the appropriate documentation in SAFE, obtain a signature from the supervisor, and send a copy to the region director. A missed priority response can only be approved when the caseworker documents reasonable efforts to locate and complete a face-to-face contact with the child. These may include:

- A. Visit the child at school. If the child is not at school, check school records for emergency contact information.
- B. Visit the child at home. Make an unscheduled home visit. Document if the family was home but refused to answer the door.
- C. Attempt contact at least twice at times other than traditional work hours.
- D. Attempt contact during the weekend.
- E. Re-check the address of the family on the CANR.
- F. Document if the spoken language of the child or family differs from the caseworker's and if a translator was not immediately available.
- G. Obtain collateral information to indicate the family is gone for more than three working days (i.e., on vacation).
- H. Determine if the child is in an alternative placement with parent (i.e., shelter) but not at the placement at the time of the caseworker visit.
- I. Obtain collateral information confirming no contact between the alleged victim and the alleged out-of-home perpetrator, and little or no risk to the alleged victim requiring immediate interview.



- J. Document if the case requires a joint law enforcement interview that cannot be arranged within the priority response time, and the risk to the alleged victim is assessed to be low and does not require immediate intervention for the child's protection.
- K. Document if the caregiver refused to allow an interview with the child.
- L. If unable to locate the child, check other agency records for another address for the child. Also, check with relatives who may have knowledge of the alleged victim's whereabouts.

## 202.6 Structured Decision Making (SDM) Safety Assessment

### Major objectives:

The CPS caseworker will assess the threats to safety and risk of future harm, given the child vulnerabilities and the protective capacities of the caregiver by completing both the Structured Decision Making (SDM) Safety Assessment and the SDM Risk Assessment. The SDM Safety Assessment will result in a determination that the child is safe, conditionally safe, or unsafe. The SDM Safety Plan is completed when the child is found to be conditionally safe and will remain in the home.

The CPS caseworker will include a domestic violence assessment, when appropriate. If a staffing is required, the CPS caseworker will document the staffing and the decisions made regarding the safety of the child.

When domestic violence is a risk factor, a consultation on the case will be held with a supervisor and, if possible, a domestic violence professional. Should a domestic violence safety plan be identified, documentation into the activity recording will only include language to the effect that a safety plan was identified for the adult and for the children.

The CPS caseworker will not document the specifics of any plan that was identified for or by the non-offending adult or child. All information will be confidential to protect the safety of the non-offending adult and child. The Domestic Violence Safety Plan cannot be released when a request is made for records.

### **Applicable Law**

Utah Code Ann. [§62A-4a-105](#). Division responsibilities.

Utah Code Ann. [§63G-2-304](#). Controlled records. [The Domestic Violence Safety Plan is a protected record.]

Practice Guidelines

The SDM Safety Assessment is used to identify immediate threats to the safety of a child and what actions and/or interventions are necessary to protect a child from the identified threats. Actions/interventions may include in-home interventions that are implemented immediately to control or mitigate the identified threat, or removal from the caregivers.

Safety versus risk assessment: It is important to keep in mind the difference between safety and risk when completing this assessment. Safety assessment differs from risk assessment in that the Safety Assessment assesses the child's present threats of harm and the interventions currently needed to protect the child. In contrast, risk assessment looks at the likelihood of future maltreatment.

The caseworker will complete the SDM Safety Assessment on all CPS investigations including out-of-home perpetrator investigations in which there is no concurrent allegation against a household member. A household includes all persons who have a familial or intimate relationship with any person in the home and who have significant in-home contact with the child(ren), excluding employees.

The assigned CPS or ongoing caseworker completes the SDM Safety Assessment.

The initial SDM Safety Assessment is required DURING the first face-to-face contact with the child victim before leaving a child in the home or allowing a child to return to the home during an investigation. In the event the child cannot be seen and/or the caseworker is denied access to the child, the Safety Assessment is completed based on initial face-to-face contacts with the caregiver(s) or other contacts if the family refuses. The Safety Assessment will be recorded in SAFE by the end of the fifth business day.

SDM Safety Assessments are completed DURING any in-person contact when a change in safety status is observed on an open case. SDM Safety Assessments are also required prior to removing from or returning a child home and prior to when an SDM Safety Plan is changed or concluded. Each SDM Safety Assessment will be recorded in SAFE by the end of the fifth business day.

A final SDM Safety Assessment is required prior to concluding an investigation that will not result in opening an ongoing case if there were any safety threats identified during the course of the investigation and/or an SDM Safety Plan initiated. Resolution of any identified safety threat(s) must be documented.

The SDM Safety Assessment is used to guide decisions about the removal of a child from his or her family. It also guides decisions on whether or not the child may remain in the

home, the need for interventions to eliminate the threat of immediate harm, or if the child must be removed.

The caseworker will complete an SDM Safety Plan for all children in the household when any threat to safety has been identified. If the parent refuses to sign the Safety Plan, the caseworker will leave a copy of the unsigned plan with the parent and document in the activity logs both the refusal and that a copy of the plan was left with the parent. If a verbal safety agreement is made the caseworker will document the specifics in the activity logs.

Assessing child safety is a critical consideration throughout the involvement of Child and Family Services with the family. Threats to safety will be evaluated during each contact with the family. After the initial SDM Safety Assessment is completed, subsequent SDM Safety Assessments will be completed whenever a change in the family's circumstances poses a safety concern and the need for possible protective interventions.

If the investigation will be closed and no other agency services will be provided, case documentation will specify how all identified threats to safety were resolved.

If the investigation results in an ongoing case, the CPS caseworker will indicate whether the SDM Safety Plan and interventions are still applicable.

## 202.7 Structured Decision Making (SDM) Risk Assessment

### Major objectives:

The SDM Risk Assessment is an evidenced-based tool that identifies the probability of future abuse or neglect to children. The risk levels are: very high, high, moderate, or low. The SDM Risk Assessment is an objective appraisal of the likelihood that a family will abuse or neglect their children in the next 12 to 18 months. High risk families have significantly higher rates of subsequent referral and supported findings than low risk families, and they are more often involved in serious abuse or neglect incidents.

When risk is clearly defined, the choice between serving one family and another family is simplified: Child and Family Services' resources are targeted to higher risk families because of the greater potential to reduce subsequent maltreatment.

### **Applicable Law**

Utah Code Ann. [§62A-4a-105](#). Division responsibilities.

Utah Code Ann. [§63G-2-304](#). Controlled records. [The Domestic Violence Safety Plan is a protected record.]

Practice Guidelines

The SDM Risk Assessment will be completed on all initial CPS investigations of child abuse or neglect, including new investigations on existing cases except the following:

- A. Cases with a finding of Unable to Locate.
- B. Cases with a finding of Unable to Complete.
- C. Cases with a finding of False Report.

The case worker assigned to the CPS investigation will complete the SDM Risk Assessment.

Discretionary overrides of the risk level will be reviewed and approved by the caseworker's supervisor.

The SDM Risk Assessment will be completed on all CPS cases prior to case closure after the CPS caseworker has reached a finding regarding the allegation (supported, unsupported, or without merit) AND prior to a decision to open a case for services or close without further services.

The SDM Risk Assessment identifies the level of risk of future maltreatment. The risk level guides the decision to close a referral or open an ongoing case.

Final Risk Level	Recommendation
Low	Do Not Open*
Moderate	Do Not Open*
High	Open
Very High	Open

\*Low and moderate risk cases should be opened if the most recent SDM Safety Assessment finding was conditionally safe or unsafe.

For cases opened for ongoing services following the investigation, the risk level is used to determine the contact requirements for the case (service level).

The SDM Risk Assessment is completed on households. A household includes all persons who have a familial or intimate relationship with any person in the home and who have significant in-home contact with the child(ren), excluding employees.

- A. Only one household can be assessed on the risk assessment form.

- B. Always assess the household in which the child abuse/neglect/dependency incident is alleged.
- C. A second SDM Risk Assessment will be completed for any non-custodial parents who will receive reunification services.

The items on the SDM Risk Assessment are scored by the caseworker. Some characteristics are based on facts (such as prior child abuse/neglect history or the age of the child). Others require the caseworker to use discretionary judgment based on his or her assessment of the family. Sources of information used to determine the caseworker's score of the item may include statements by the child, caregiver, or collateral persons; caseworker observations; or reports.

The caseworker will refer to the SDM Risk Assessment Definitions to determine the score for each item.

## 202.8 Medical Examination Of The Child

### Major objectives:

Child and Family Services staff will ensure timely medical attention to a child when there has been trauma caused from severe maltreatment, serious physical injury, recent sexual abuse, fetal addiction, medical neglect, or any exposure to a hazardous environment, including those involving illegal drug/chemical production.

### **Applicable Law**

Utah Code Ann. [§62A-4a-202.3](#). Investigation -- Supported or unsupported reports -- Child in protective custody.

### Practice Guidelines

- A. Child and Family Services staff will obtain all pertinent medical information needed to provide proper medical care for the child. This would include the child's current medical diagnosis, allergies, medications, and primary care providers. CPS caseworkers will request from the caregiver the child's medical history and where all prior medical attention has been received.
- B. When necessary and indicated, a medical examination will be completed within 24 hours in a priority 1 and 1R investigation, and in a timely manner in priority 2, and 3 investigations. [See: Utah Code Ann. [§62A-4a-202.3](#).]
- C. Timely medical attention by a qualified health care provider will be ensured by Child and Family Services staff when there is:

1. Any inadequately explained serious physical injury, especially in a child under the age of two years.
2. Serious untreated physical injury regardless of the known cause in children of all ages.
3. Recent sexual abuse (within 72 hours) where there is an indication of physical trauma to the child and/or a need to gather evidence.
4. Fetal addiction.
5. Medical neglect involving serious medical conditions.
6. Exposure to any hazardous environment, including illegal drug production.
7. In cases involving a serious physical injury, the date of a medical examination related to the injury will be entered into SAFE prior to case closure. The examination date may be prior to the case open date as long as it was related to the injury.

The attached DCFS Child Protective Services Preliminary Exam Checklist and the [DEC Protocol](http://www.utahdecalliance.org/pdf/NBIntakeHX.pdf) (<http://www.utahdecalliance.org/pdf/NBIntakeHX.pdf>) may be used and can serve as a guide for the CPS caseworker.

- D. If a child has been treated for health concerns related to allegations of abuse or neglect or if a child has been removed and has received medical treatment including surgeries, laboratory testing, x-ray studies, and/or hospitalizations within the last seven days or is receiving medications, the CPS caseworker must contact the child's health care provider within 24 hours. If the child has a serious condition, the health care provider should be contacted immediately. The CPS caseworker should be persistent in contacting the health care provider.
- E. The Health Care Team may assist in collecting medical information.
- F. Past history—The CPS caseworker should obtain the following medical information:
  1. Prior medical condition for which the child has received medical attention now or in the past.
  2. Nature of the condition and symptoms.
  3. Name of treating physician or clinic.
  4. Medications (name, strength, frequency, prescribing physician). Bring the medication container with the client, if available.
  5. Allergies, including foods, medications, and environmental allergens.
- G. Date the child was last seen by any health care provider.
  1. Nature of visit.
  2. Required follow-up.

- 
- H. Name and location of all health care providers.
- I. The CPS caseworker will notify the child's health care provider of the following:
1. The child's caregiver contact number.
  2. The CPS caseworker contact number.
  3. The Health Care Coordinator contact number.
  4. The child's legal guardian or custodian.
- J. Medications and treatments including, but not limited to:
1. Prescribed medications.
  2. Inhalers, eye drops, dental, or hearing appliances.
  3. Over-the-counter medications.
  4. Herbal or homeopathic treatments.
  5. Illegal drugs.
- K. Other:
1. Immunization record.
  2. High risk behavioral concerns such as:
    - a. Sleepwalking;
    - b. Self-mutilation.
- L. Medical Neglect Recommendations: When a parent/guardian does not agree with a medical recommendation, they can request, at their cost, a second medical opinion by a licensed medical professional practitioner. The recommendations from the second opinion will be included in staffing the outcome and services for the case. When a parent requests a second medical opinion, but the parent is indigent and cannot pay, Child and Family Services will pay, by court order and with prior administrative approval, for the second opinion. [See: Utah Code Ann. [§78A-6-301.5.](#)]

Authorization for Medical Procedures

The CPS caseworker will consult with a health care provider to determine whether specialized medical tests (i.e., CAT scan, skeletal x-rays, MRI [Magnetic Resonance Imaging], Sonogram, Ultrasound, etc.) are needed. The health care provider may order the specialized medical tests as needed. The cost of any test(s) required by Child and Family Services may be the responsibility of Child and Family Services to pay. Therefore, if tests are recommended, advanced authorization for payment should be provided by regional administration.

Serious Medical Neglect and Emergency Court Ordered Medical Treatment

- A. Procedure for investigation of serious medical neglect:



1. When Intake receives a referral for serious medical neglect, the Intake worker determines if the medical situation is an emergency requiring immediate action and assigns priority accordingly. The caseworker should determine from a health care provider if death or significant permanent physical or mental damage is the likely outcome of refusal to follow treatment.
  2. The CPS caseworker will contact the treating medical doctor, verify the referral information, explain the investigation and court process, verify the parents' refusal to obtain treatment, and establish self as the contact for the doctor. They will also verify that treatment of the child's condition will not be seriously jeopardized while awaiting a court hearing, and they will request immediate notification in the event the child's situation deteriorates.
  3. The CPS caseworker will meet with the parents, attempt to negotiate voluntary compliance with medical treatment pending or in lieu of court involvement, and assess and document the parents' reasons for refusal to treat.
  4. The CPS caseworker will inform the parents that they have the right to request a second opinion from a licensed professional medical practitioner and that the parent retains responsibility for payment. If the second opinion is requested but the child needs medical treatment sooner than the second opinion can be obtained, the CPS caseworker will move to step 5.
  5. The CPS caseworker will initiate court action by contacting the Attorney General when parents fail to voluntarily comply and medical treatment is necessary.
  6. In cases where the consequence of the parents' failure to follow treatment may be death or significant permanent physical or mental damage, the CPS caseworker will take steps to initiate emergency court proceedings by contacting an Attorney General immediately and will not attempt to resolve the situation through voluntary services alone.
  7. The CPS caseworker will attend all court proceedings related to court orders for medical treatment and will implement any court orders giving Child and Family Services responsibility to ensure the child receives necessary medical care until such time as the case is transferred to an in-home caseworker or is closed.
  8. The CPS and ongoing caseworker will hold a Child and Family Team Meeting to involve the family in planning and decision-making.
- B. Criteria for court-ordered medical treatment of a minor:
1. The outcome of failure to treat is death, permanent loss of a body function, or significant physical or mental impairment.



2. The parent or guardian has been fully informed of the probable consequences if the condition is left untreated, the alternative treatments available, the consequences of each treatment, the risks of each treatment, and the probability of each alternative outcome.
3. In non-emergent situations, the parent or guardian has been given the opportunity to obtain a second opinion.
4. The treatment is well established and well accepted by the medical profession.
5. A reasonable parent or guardian would not refuse treatment for the child yet treatment is refused.
6. Delay in treatment increases the probability of harm.
7. The probability that the treatment will be successful and that it will provide the child a good quality of life outweigh possible negative consequences and side effects.
8. No alternative treatment will meet the child's medical needs.

#### Triage Procedures for Medical Care

- A. Always call 911 in an emergency.
  1. When there is a question, please consult with a health care provider or Primary Children's Medical Center (PCMC).
  2. If the following are present, a health care provider should see the child as soon as possible:
    - a. Any child who appears acutely ill;
    - b. Suicidal ideation and/or threat with lethal plan and with or without means;
    - c. Need for forensic evidence collection for rape kit (sexual contact within 72 hours);
    - d. Acute vaginal or rectal bleeding, vaginal or rectal pain, and/or genital or anal trauma (includes blood found on diaper or underwear);
    - e. If a drug-facilitated rape is suspected, within 96 hours of "drugging" the collection of blood and urine specimens should be considered.
    - f. Fever above 100.4 degrees in an infant less than three months of age;
    - g. Fever accompanied with seizures or other concerning behavior if over three months;
    - h. Infant with bruising suggestive of fractures;
    - i. Difficulty walking or moving normally;
    - j. Child or youth appears severely neglected, malnourished, deprived of food, or dehydrated;
    - k. Vaginal or penile discharge and the possibility of sexually transmitted disease or a history suggestive for sexually transmitted

- 
- 1584 disease(s) (vaginal or penile discharge may not cause any symptoms  
1585 but may be noticed by a caregiver on the diaper or underwear; other  
1586 concerns for sexually transmitted disease include any history of  
1587 genital ulcers or blisters, or any unusual rash in the genital area);  
1588 l. Severe dental conditions and/or complaints of pain;  
1589 m. Exposure to environmental toxins, with a need to collect urine and  
1590 hair specimens for forensic purposes (e.g. Methamphetamine lab).  
1591 3. Photo documentation:  
1592 a. Medical attention takes priority;  
1593 b. Take photos for forensic use after medical attention has been  
1594 initiated;  
1595 c. Photos may be taken by:  
1596 i. Law enforcement;  
1597 ii. Medical facility;  
1598 iii. Child and Family Services.  
1599  
1600 B. Non-urgent care:  
1601 1. Non-urgent medical attention:  
1602 a. Well-child examination (five days following removal);  
1603 b. Possible failure to thrive without medical compromise;  
1604 c. Rash, not associated with fever or an allergic reaction;  
1605 d. Skeletal survey needed to determine fractures (only in children  
1606 below the age of three years as medically indicated);  
1607 e. Medical neglect not involving serious medical conditions (requires  
1608 medical examination 30 days before or after disposition of referral).  
1609 2. Exams conducted in a non-emergency room setting can reduce the anxiety  
1610 surrounding sexual abuse investigations.  
1611

## 202.8a Medical Consultation Protocol When There Is Reasonable Suspicion Of Severe Abuse

### Major objectives:

An investigation involving reasonable suspicion of severe child abuse requires a medical examination of the primary victim. Caseworkers will investigate all children of the household as a Sibling or Child at Risk when the injuries on the primary victim are suspected to be severe abuse and there are concerns related to the caregivers in that household. All non-verbal children in the household will also be required to receive a medical examination.

### Practice Guidelines

- A. Cases involving reasonable suspicion of Severe Abuse will include the following activities:
  1. Caseworkers will investigate all children of the household as a Sibling or Child at Risk when the injuries on the primary victim are suspected to be non-accidental and there are concerns related to the caregivers in that household.
    - a. As in all cases, caseworkers will list all children of the household in SAFE.
    - b. Allegations of Sibling at Risk will be added, with each child of the household listed as a victim.
    - c. Caseworkers will request a medical examination for all non-verbal children of the household from the legal guardians.
    - d. Caseworkers will document outcomes of medical examination or barriers to medical examination of children of the household (lack of insurance, lack of transportation, lack of time, refusal by medical providers, refusal by caregivers), including steps taken by the caseworker to help the family overcome those barriers.
    - e. Caseworkers will give consulting medical providers information regarding potential abuse exposure and of the potential for unsuspected physical abuse findings.
  2. Caseworkers will provide caregivers information regarding the potential mental health consequences of witnessing abuse and provide referrals to caregivers.
  3. In all cases involving non-verbal children with severe and/or unexplained injuries, CPS caseworkers will consult with an independent licensed medical provider with expertise in the evaluation of child physical abuse regarding those injuries prior to case closure.

## 202.9 On-Call Intake And CPS (Non-Business Hours)

### Major objectives:

Child and Family Services is required to provide a response to reports of child abuse, neglect, or dependency 24 hours a day, seven days a week. To ensure the appropriate response, CPS on-call is assigned to qualified Child and Family Services child welfare staff to obtain information from the referent, fulfill all responsibilities as outlined in major objectives for Intake, and, as necessary, respond within appropriate time frames to priority 1, 1R and 2 cases. All time requirements are applicable to on-call responses. [See: Major objectives [Section 202.4.](#)]

### **Applicable Law**

Utah Code Ann. [§62A-4a-105](#). Division responsibilities.

### Practice Guidelines

The on-call or CPS caseworker assigned to the case will complete the following:

- A. Obtain information from the referent and determine the disposition of the referral (i.e., information only contact, additional information, accepted, unaccepted).
- B. Complete the Intake Checklist on priority 1, 1R, and 2 referrals.
- C. A case involving an alleged victim residing in a domestic violence shelter with a non-offending caretaker should not automatically be assumed to be a priority 3. The case should be screened based on risk and safety factors for the child.
- D. Ensure face-to-face contact with the child within priority time frames.
- E. Conduct a personal interview with or observation of the child, as appropriate.
- F. Ensure that the alleged victim is offered a support person. Ensure the child's support person meets the specified criteria for a support person and, if requested, is notified and available for the personal interview with the child.
- G. Ensure that the parent/guardian receives notification of the investigation and the interview with the child. [See: Major objectives [Section 203.1.](#)]
- H. If an investigative interview takes place with a child who is five years of age and older, who is able to communicate, and after the child is taken into protective custody, all investigative interviews will be audio and/or videotaped prior to the adjudication hearing. [See: Utah Code Ann. [§62A-4a-202.3.](#)]

- 1692  
1693 I. A child under the age of five years will be personally interviewed by the CPS  
1694 caseworker if the child is verbal and has the ability to provide information  
1695 relevant to child vulnerabilities, threats of harm, and protective capacities of the  
1696 caregiver (a child who is non-verbal will be observed and assessed).  
1697  
1698 J. Complete an SDM Safety Assessment that includes all children in the household.  
1699  
1700 K. If the safety decision indicates that the child is conditionally safe and the child will  
1701 be left in the home, complete an SDM Safety Plan as defined in [Section 202.6](#).  
1702 Discuss with the family the extent to which the child's extended family may  
1703 provide needed protection.  
1704  
1705 L. Complete staffings per major objectives. [See: Major objectives [Section 204.2](#).]  
1706  
1707 M. Complete all actions to ensure safety and protection for alleged victims and  
1708 siblings, as appropriate.  
1709  
1710 N. Ensure that medical and/or mental health evaluations are completed when  
1711 appropriate as required by statute and major objectives for physical injury, severe  
1712 physical abuse, medical neglect, or recent sexual abuse. [See: Major objectives  
1713 [Section 202.8](#).]  
1714  
1715 O. Ensure that the short-term placement provider has all relevant medical, social,  
1716 mental health, and educational information on the child within 24 hours.  
1717  
1718 P. Complete required documentation in SAFE for Intake and CPS.  
1719  
1720 Q. Complete removal paperwork, as appropriate.  
1721  
1722 R. Deliver removal paperwork to the parent/guardian.  
1723  
1724 S. Complete a personal 48-hour removal visit.  
1725  
1726 T. Deliver all information to CPS Intake no later than 9:00 a.m. of the following  
1727 business day.  
1728  
1729 U. Attend the 24-hour multidisciplinary team consultation.  
1730  
1731 V. Attend the Shelter Care Hearing.  
1732  
1733 W. Attend all other court hearings, as notified by the Attorney General's Office.

## 202.10 Court-Ordered Family Assessment

### Major objectives:

When receiving a court order to investigate and assess a family and there is no allegation of abuse, neglect, or dependency, Child and Family Services will open an In-Home Services (IHS) case. Safety (child vulnerability, threats of harm, and protective capacities of the caregiver), health, and the best interest of the child will be assessed and a report submitted to the court.

Child and Family Services does not conduct court ordered home evaluations regarding child custody issues.

### **Applicable Law**

Utah Code Ann. [§62A-4a-105](#). Division responsibilities.

### Practice Guidelines

An IHS case is appropriate when all of the following criteria are met.

- A. The court order/request is received by Child and Family Services to assess a family, and
  1. There are NO allegations of abuse, neglect, or dependency;
  2. The court has provided Child and Family Services with the child's full name and his/her age;
  3. The court has provided Child and Family Services with an address for the family and additional contact information.
- B. An IHS case will be opened using the following:
  1. The caseworker will make an initial contact with the family.
    - a. The caseworker will disclose the request for investigation from the courts.
    - b. The caseworker will obtain a release of information permission form from the parent/guardian of the child. This release will be documented in the case record and will include the name and role of the person giving permission.
    - c. If the parent/guardian refuses to cooperate, the caseworker will report to the court that the case cannot be completed.
  2. The caseworker will make no collateral contacts without obtaining the authorization form from the parent/guardian.
- C. The IHS case will include the following:

1. Documentation of release of information from the parent or guardian;
2. Home and family risk assessment;
3. Court report describing the findings;
4. Open an IHS case for no more than 45 days.

- D. If abuse or neglect is identified during the IHS assessment, open a CPS investigation.

## 202.11 Not Used

## 202.12 Independent Home Study

### Major objectives:

When receiving an Independent Home Study (IHS) case, the CPS caseworker will assess for child safety, determine services or resources that may be needed by the family, and provide the family with information needed to access services or resources.

Child and Family Services does not conduct court-ordered home evaluations regarding child custody issues.

### **Applicable Law**

Utah Code Ann. [§62A-4a-105](#). Division responsibilities.

### Practice Guidelines

- A. An IHS case will include the following:
1. Contact with at least one biological parent and/or legal guardian within five business days of the case being opened.
  2. Interview the child with consent of the parent.
  3. The CPS caseworker will make no collateral contacts without obtaining consent from a parent/guardian.
  4. Offer resource information and additional services if deemed appropriate.
  5. All CPS caseworker activities will be logged in SAFE.
  6. An IHS case will be open for no more than 60 days unless approved by the region director or designee.
- B. If during the IHS case abuse or neglect is identified, the CPS caseworker will call Intake and a CPS case will be opened.

## 203 Engagement Begins: Initial Interviews And Home Visits

### 203.1 Interviews

#### Major objectives:

The CPS caseworker will utilize interviews as part of the investigation.

#### **Applicable Law**

Utah Code Ann. [§62A-4a-202.3](#). Supported or unsupported reports -- Child in protective custody.

Utah Code Ann. [§62A-4a-414](#). Interviews of children -- Recording required.

#### Practice Guidelines

Interviews are to follow the statutory requirements indicated below:

- A. Referent: The CPS caseworker will interview the person who reported the abuse in order to gather and/or clarify information, unless the report was made anonymously. The interview may not be necessary if the report came from law enforcement. The interview may be conducted by telephone. [See: Utah Code Ann. [§62A-4a-202.3](#).]
- B. Child: Any child identified as an alleged victim having the ability to communicate verbally or through another reliable means (i.e., communication board, American Sign Language, writing, etc.) will be interviewed. If the child requires a translator for the interview, the CPS caseworker will make reasonable efforts to have one available. An infant or child who is non-verbal will be observed and assessed. The child must be awake for the CPS caseworker to satisfy the face-to-face requirement. This must be clearly documented. A CPS caseworker will not conduct an interview with a child by telephonic means (i.e., e-mail, telephone, etc.). The interview will take place outside the presence of the alleged perpetrator. The CPS caseworker may request a courtesy caseworker conduct a personal interview or to observe the child if the caseworker would have to travel an unreasonable distance to see the child. [See: Utah Code Ann. [§62A-4a-414](#). Interviews of children -- Recording required.]
  1. Support person:
    - a. The CPS caseworker will let the child know that he or she has the right to have a support person present during the interview.
    - b. The CPS caseworker will make reasonable efforts to arrange for the child's choice of a support person to be present for the interview.
    - c. The support person will be an adult over the age of 18 years, who is reasonably available and who is not the alleged perpetrator.



- d. The support person may include (but is not limited to):
    - i. School teacher or administrator;
    - ii. Guidance counselor;
    - iii. Child care provider;
    - iv. Family member;
    - v. Family advocate;
    - vi. Clergy.
  - e. The support person may not be a person who is alleged to be, or potentially may be, the alleged perpetrator.
  - f. The CPS caseworker will provide a confidentiality statement for the support person to sign. This document will be maintained in the CPS record.
2. Parent notification of child interview:
- a. If a child's parent, stepparent, or parent's paramour has been identified as the alleged perpetrator, the CPS caseworker need not notify a parent prior to the initial interview with the child. In all other instances where the alleged perpetrator is known, the parent or guardian must be notified prior to the initial interview with the child. [See: Utah Code Ann. [§62A-4a-409.](#)]
  - b. If the alleged perpetrator is unknown or if the alleged perpetrator's relationship to the child's family is unknown, the CPS caseworker may conduct a minimal interview, not to exceed 15 minutes from the time the interview begins with the child prior to notification of the interview to the child's parent. This is designed to allow the CPS caseworker to determine whether or not the parent, stepparent, or parent's paramour is the alleged perpetrator. If the initial disclosure made by the child implicates a parent, stepparent, or parent's paramour, the interview is not limited in duration. Notification may take the form of a phone call documented in activity records and does not mean permission or approval. The information imparted to the parent/guardian will include the specific allegations and the time and place of the interview with the child. If criminal activity is disclosed, the CPS caseworker will coordinate with law enforcement prior to notification of the parents so as not to impede the criminal investigation. [See: Utah Code Ann. [§62A-4a-409.](#)]
  - c. The CPS caseworker will notify the parent as soon as practicable after the child has been interviewed, but in no case later than 24 hours after the interview has taken place.
  - d. The parent will be notified prior to any subsequent interviews of the child.
  - e. Exceptions to notification may include:

- 
- 1897 i. Notice to the parent would threaten the safety of a non-  
1898 offending parent, the children, or other involved individuals;  
1899 ii. A parent is incarcerated or there are other legal barriers to  
1900 notification (such as court orders, police requests, etc.).  
1901 3. Disclosure of criminal activity: If the disclosure made by the child gives  
1902 reasonable cause to believe that the child has been the alleged victim of  
1903 criminal activity, the CPS caseworker will immediately contact law  
1904 enforcement.  
1905  
1906 C. Parent/guardian:  
1907 1. The child's natural parents or other guardian will be personally interviewed  
1908 regardless of residence, unless their whereabouts are unknown. [See: Utah  
1909 Code Ann. [§62A-4a-202.3](#).] If the child's natural parents or other guardian  
1910 are incarcerated at the time of the investigation, they do not need to be  
1911 personally interviewed. This interview maybe conducted with only one  
1912 parent. Investigation and interview exceptions are as follows:  
1913 a. Parent(s)/guardian(s) are incarcerated.  
1914 b. Caseworker is unable to locate parent(s) or guardian(s).  
1915 c. Parent(s)/guardian(s) are non-cooperative.  
1916 Documentation of reasons for not interviewing a parent are required.  
1917 2. Each specific allegation will be discussed. Admissions or denials will be  
1918 documented in the activity recording.  
1919 3. The parents will be asked about the child's eligibility for or membership in a  
1920 Native American tribe.  
1921  
1922 D. Third party/collateral contacts:  
1923 1. Unless impossible or inappropriate, third party/collateral contacts having  
1924 had direct association with the child, or who are otherwise knowledgeable  
1925 about the case, will be interviewed.  
1926 2. If a third party or collateral contact is identified as an eyewitness or has  
1927 first-hand knowledge of the alleged abuse, neglect, or dependency, an  
1928 interview will be conducted.  
1929  
1930 E. Alleged perpetrator:  
1931 1. The alleged perpetrator will be interviewed by the CPS caseworker.  
1932 2. When the alleged perpetrator resides in the home of the child or has  
1933 access to the child, and when law enforcement has requested that the CPS  
1934 caseworker not conduct an interview regarding the allegations, the alleged  
1935 perpetrator will not be interviewed by the CPS caseworker until the  
1936 interview is cleared by law enforcement.  
1937 3. The CPS caseworker will not be obligated to conduct an interview when:

- 
- 1938 a. Law enforcement requests the CPS caseworker not conduct an  
1939 interview due to a pending criminal investigation in these cases.  
1940 CPS will communicate with law enforcement the need to have law  
1941 enforcement interview within CPS investigation time frames.  
1942 b. The alleged perpetrator's identity or location is unknown.  
1943 c. The safety of the child or the CPS caseworker is a concern, or in  
1944 domestic violence cases when the safety of the non-offending  
1945 parent is a concern, as determined by the reasonable request of the  
1946 non-offending parent.  
1947 d. The alleged perpetrator is incarcerated during the course of the CPS  
1948 investigation.  
1949 4. If the alleged perpetrator is a juvenile:  
1950 a. The CPS caseworker will seek the permission of the juvenile's  
1951 parent or guardian prior to the interview.  
1952 b. Requests for interviews by law enforcement of children in the  
1953 custody of Child and Family Services will be referred to the GAL  
1954 assigned to the child. If there is no GAL appointed for the child, the  
1955 caseworker will refer the request to region administration (Practice  
1956 Guidelines [Section 306.7](#), Utah Code Ann. [§62A-4a-415](#)).  
1957 c. The CPS caseworker will interview a parent or guardian of the  
1958 juvenile perpetrator for the purpose of gathering additional  
1959 information.  
1960 d. The CPS caseworker will not be obligated to conduct an interview  
1961 with the juvenile perpetrator or their family when law enforcement  
1962 conducts these interviews and provides CPS with enough  
1963 information to complete the significant risk assessment and  
1964 determine whether or not any safety concerns exist.  
1965 e. At the conclusion of the investigation, assess the past victimization  
1966 of the juvenile perpetrator and refer for appropriate treatment.  
1967  
1968 F. Interview exceptions: The CPS caseworker may rely on a written report of a prior  
1969 interview rather than conducting an additional interview if:  
1970 1. Law enforcement has previously conducted a timely and thorough  
1971 investigation regarding the alleged abuse, neglect, or dependency and has  
1972 produced a written report. When law enforcement requests that CPS  
1973 conduct no interview, the CPS caseworker may review the case with a  
1974 supervisor for evaluation and determination of the next step.  
1975 2. The investigation included one or more of the interviews required by  
1976 subsection (2) of Utah Code Ann. [§62A-4a-202.3](#).  
1977 3. It is determined that an additional interview is not in the best interest of  
1978 the child.  
1979

- G. Additional victims revealed (refer to reporting requirements found in Utah Code Ann. [§62A-4a-403](#)): If during the course of an interview a child reveals the possibility of another alleged victim of abuse or neglect, the CPS caseworker will do the following:
1. The CPS caseworker will ask the child for further clarification regarding the identity of the additional alleged victim.
  2. If the CPS caseworker is able to identify the additional alleged victim or a means for locating this alleged victim, and the victim is identified as a child residing outside the home of the primary victim, the CPS caseworker will contact the Intake office to determine if the allegations meet the criteria for opening a new case.
  3. If the CPS caseworker is able to identify the additional alleged victim or a means for locating this alleged victim, and the victim is a sibling residing in the same home as the primary victim, the new victim will be added to the existing CPS case if the allegation meets the criteria for investigation.
  4. If the child does not reveal the name of the additional alleged victim or does not provide a means for locating this alleged victim, the CPS caseworker will make efforts to try to identify the additional alleged victim with the limited information acquired. This may include talking with a collateral contact, parent, or relative that may know the identity of the additional alleged victim.
  5. If the CPS caseworker is unable to identify the additional alleged victim mentioned in the interview, the CPS caseworker will contact the Intake office to provide the information that is available.
  6. The Intake worker will determine if there is additional information available through data inquiries that may assist in identifying the additional alleged victim.
  7. If the Intake worker is able to identify the identity of the additional alleged victim and the information meets the criteria for investigation, Intake will open the case.
  8. If the Intake worker is unable to identify the additional alleged victim, the Intake worker will notify the CPS caseworker calling in the referral that the case has been unaccepted so that the referring CPS caseworker can document this information in the case logs.

### 203.1a Recording Interviews

Major objectives:

Child and Family Services will make an accurate recording of interviews conducted with children during an investigation into allegations of child abuse or neglect. Information gathered during the interview will be documented in SAFE.

**Applicable Law**

Utah Code Ann. [§62A-4a-105](#). Division responsibilities.

**Practice Guidelines**

- A. All investigative interviews of children involving allegations of sexual abuse and/or serious physical abuse are to be videotaped and/or audio recorded. This does not apply to initial or minimal interviews. The videotaping requirements are as follows:
1. The child and the interviewer will be simultaneously videotaped.
  2. Videotaping will be continuous and will log the date, place, and time.
  3. Videotaping must be for the duration of the interview.
  4. Interviews are to be conducted in a Children's Justice Center (CJC) if possible, or, if necessary, a soft (non-threatening) interview room.
  5. If videotape equipment and a soft (non-threatening) interview room are unavailable, the interview will be audio taped in accordance to sections B and C.
  6. Even if videotaping, an audio file compliant with the SAFE system must be created for every Child and Family Services conducted interview. If the interview location creating the video does not have the ability to provide Child and Family Services with a correctly formatted digital audio of the interview, the caseworker should simultaneously audio record the interview for download into the SAFE system.
- B. All other interviews will be audio recorded by Child and Family Services in a SAFE compliant digital format unless there are exceptions as noted in sections D and E.
- C. Information to be recorded at the beginning of each interview is as follows:
1. The name of the caseworker conducting the interview.
  2. The place of the interview.
  3. The time and date of the interview.
  4. The full name and age of the child being interviewed.
  5. All other persons present in the interview and their roles during the interview (i.e., support person, police officer, caseworker, etc.).
- D. The recording will be continuous unless:
1. At some point in the interview the child requests that the recording device be turned off or refuses to be recorded.
  2. There are circumstances that require the interview to be interrupted or terminated.

- E. If the child refuses to be recorded, the caseworker is to complete the following steps:
1. Explain that the recording helps the caseworker remember what was said, assures accurate information, and takes the place of notes.
  2. If necessary, ask the child if they would feel more comfortable being recorded if the support person first offered was in the room with them.
  3. If the child still refuses to be recorded, and:
    - a. The child is over age 9, the caseworker will attempt to get the child's refusal on the digital audio recording and/or will document in the activity logs the child's reasons why they do not want to be recorded, and then continue with the interview, without recording, to assess the child's safety. The caseworker will document all pertinent information regarding safety from the interview in the activity logs.
    - b. If the child is under the age of 9, the caseworker will make reasonable efforts to put the child at ease with being recorded and continue the interview, as suggested in section E. If the child again refuses to have the interview taped, the caseworker will attempt to get the child's refusal on the digital audio recording, will discontinue the interview, and:
      - (1) Discuss with the child who they can talk to if they feel unsafe in the future, and
      - (2) Document the refusal and the concerns in the activity log.
- F. Activity Recording documentation:
1. If the allegation involved sexual or serious physical abuse and was not videotaped at the CJC, the caseworker will document the alternate soft (non-threatening) location where the interview occurred and why it could not occur at the CJC.
  2. The caseworker will document in the Activity Recordings the information listed in section C and a brief description of the evidence or information gathered during the interview that would provide support, if any, to the allegation.
  3. If for any reason the interview recording is not continuous or complete, the caseworker will document the reasons why the interruption and/or non-completion occurred.
  4. All Child and Family Services conducted victim's interview will include a digital audio recording that will be downloaded into the SAFE system by the CPS caseworker or a trained assistant before case closure for the case record and future reference.

- G. The audio and video recordings and any interview information can be shared and/or copied for police officers and detectives that are investigating child abuse or neglect.
- H. Audio and video recordings made at any Children's Justice Center cannot be distributed, released, or displayed to anyone without a court order as defined in Utah Code Ann. [§77-37-4](#). All requests for recordings must go through the Government Records and Management Act (GRAMA) specialist.

### 203.1b Visual Assessment Of A Child

Major objectives:

When physical abuse, sexual abuse, or neglect with an injury or other physical manifestation is alleged, the child's body will be observed or examined for evidence of the alleged manifestation or injury (physical trauma, such as bruises, welts, or burns; or physical condition, such as bug or rodent bites, rashes, malnutrition, body dirt, or sexual abuse) in a way that is sensitive to the child's age, gender, and emotional well-being. Examination/observation for sexual abuse allegations is to be conducted by a medical professional only.

#### **Applicable Law**

Utah Code Ann. [§62A-4a-105](#). Division responsibilities.

#### Practice Guidelines

- A. When a visual assessment of the child is necessary, the child's body will be observed in the least intrusive manner, and the documentation will be conducted in a way that is sensitive to that child's age and gender according to the standards below.
1. If a child has injuries or manifestations that need immediate medical attention, notify the non-offending parent/guardian and assess their willingness to transport the child for an immediate medical assessment.
  2. If the child does not need immediate medical care and the injury or physical manifestation can be readily seen on the child without repositioning clothing, move ahead with photographing and/or documenting the injuries. If the child refuses to allow photographs, refer to section B.
  3. If the injury or physical manifestation is on non-private areas of the body that can be accessed by minimal repositioning of the clothing:
    - a. If the child is under the age of three years and/or is non-verbal, ask the parent or caregiver to reveal the place of alleged abuse on the child's body for photographing and/or documentation.



- 
- 2143                    b.        If the child is verbal and/or over the age of three years, ask the child  
2144                                    if they are comfortable displaying the injury and, if the child agrees,  
2145                                    photograph and/or document the injury or manifestation.  
2146                    c.        If the child refuses to display the injuries, refer to section B.  
2147                    4.        If the injury or physical manifestation occurred on the buttock or stomach  
2148                                    **area** of the child's body and the child has disclosed that the abuse occurred  
2149                                    and/or the child or another person has seen the injury or manifestation:  
2150                                    a.        Have another adult present (i.e., another professional or caregiver)  
2151    when possible, and  
2152                                    b.        Ask the child if they are comfortable showing the area or a partial  
2153    area of the abuse to be photographed and/or documented, and  
2154    document if the child agrees.  
2155                                    c.        If the child refuses to display any part of the injury, refer to section  
2156    B.  
2157                    5.        If the injury or physical manifestation occurred in a private area of the  
2158                                    child's body and the child has disclosed the abuse and possible injury is  
2159                                    indicated, refer the non-offending parent/guardian to obtain a medical  
2160                                    exam for the child. If the parent refuses, staff the case with a supervisor  
2161                                    and Assistant Attorney General to determine whether the allegation  
2162                                    circumstances require that a warrant or investigative subpoena should be  
2163                                    pursued to ensure the child's safety.  
2164                    6.        If there is alleged sexual abuse with a possible injury or physical evidence  
2165                                    indicated, arrange for a sexual abuse exam where a qualified medical  
2166                                    professional can conduct an exam and determine whether there is  
2167                                    evidence of sexual abuse and/or injury. If there has already been a sexual  
2168                                    abuse exam conducted by a qualified professional, use the results of that  
2169                                    exam and do not require another exam. If the parent refuses, staff the  
2170                                    case with a supervisor and Assistant Attorney General to determine  
2171                                    whether the allegation circumstances require that a warrant or  
2172                                    investigative subpoena should be pursued to ensure the child's safety.  
2173  
2174                    B.        If the child refuses to display the injuries or manifestations:  
2175                                    1.        Offer to have a non-offending parent/guardian or another adult support  
2176    person of the child's choice present.  
2177                                    2.        If the child continues to refuse and/or the parent/guardian or support  
2178    person refuses to allow the injury or manifestation to be displayed, contact  
2179    law enforcement to refer the case and gather evidence. Obtain a copy of  
2180    this evidence for the CPS record.  
2181                                    3.        If law enforcement refuses the case, contact the supervisor and staff with  
2182    an Assistant Attorney General to determine whether the allegation  
2183    circumstances require that a warrant or investigative subpoena should be  
2184    pursued to ensure the child's safety.



- C. The taking of photographs is an accepted practice in documenting evidence of physical abuse or neglect. The taking of photographs is subject to the same restrictions listed above for visual assessment. Photographs of children that involve abuse to the genitalia or female breast area may only be taken by a qualified medical professional during a medical examination.

## 203.2 Home Visits

### Major objectives:

The CPS caseworker will complete a home visit during the course of each investigation in order to make a thorough assessment of the family. The caseworker will assess for safety, risk, health, and well-being of the child and family.

### **Applicable Law**

Utah Code Ann. [§62A-4a-202.3](#). Investigation -- Supported or unsupported reports -- Child in protective custody.

### Unscheduled Home Visits

CPS caseworkers will complete unscheduled home visits in cases with allegations involving Domestic Violence, Child Endangerment (when there are concerns of drug use or drug activity in the home), Environmental Neglect, Non-Supervision, and Physical Neglect. Unscheduled home visits will occur on cases involving other allegation types when the information gathered would indicate a need for an unscheduled visit to the home.

An unscheduled home visit will be completed at the residence where the alleged abuse or neglect occurred, unless the following circumstances exist:

- A. There is a reasonable basis to believe that the reported abuse was committed by a person who is not the child's parent, and who does not:
1. Live in the child's home; or
  2. Otherwise have access to the child in the child's home; or
- B. There is reason to believe no additional information related to the allegations would be obtained by completing an unscheduled home visit.

### Scheduled Home Visits

A scheduled home visit will be completed on all cases where an unscheduled home visit is not required. If the alleged perpetrator is a parent or guardian of the victim, the scheduled home visit will occur in the household of the alleged perpetrator. If the

alleged perpetrator is not a parent or guardian of the victim, the scheduled home visit will be completed where the child primarily resides.

Exceptions to Completing an Unscheduled or Scheduled Home Visit

- A. The family has moved out of state and the child currently resides with the family in another state.
- B. The child has been placed in foster care prior to the closure of the CPS case.
- C. The parent/guardian refuses access to the home or is unwilling to make an appointment for a visit to occur.

Practice Guidelines

- A. An unscheduled or scheduled home visit may take place anytime during the course of the investigation.
- B. The CPS caseworker may request to observe, in the company of the parent/guardian, areas of the residence where the child has access to or sleeps, plays, and spends time. The CPS caseworker will discuss any conditions observed that impact the health or safety of the child. [See: CPS Practice Guidelines [Section 204.5a.](#)]
- C. The CPS caseworker will document the observations made as to the conditions of the home and of any health and/or safety issues identified. It is not required for the CPS caseworker to observe the contents of the following, unless the allegations give specific need to ensure availability of food and/or clothing, or to ensure that conditions do not pose safety or health risks to the child:
  - 1. Cupboards and drawers.
  - 2. Refrigerator and/or freezer.
  - 3. Areas of the home usually closed to the view of visitors.
- The CPS caseworker will obtain the parents' consent prior to looking in the areas mentioned above.
- D. If, after trying to engage with the family, access to the home or the child is denied, and if there is credible evidence of conditions that must be investigated, the CPS caseworker will staff the case with the supervisor to determine whether or not the case should be reviewed with the Attorney General's Office.
- E. If the CPS caseworker makes an unscheduled home visit but does not locate anyone home, the CPS caseworker will continue to return at times when families are normally found to be at home. If the CPS caseworker is unsuccessful, the CPS

caseworker may leave a business card or other written information at the time of the second visit that requests the parent or guardian to contact the CPS caseworker.

### 203.3 Entry Into The Child's Home

#### Major objectives:

CPS caseworkers have authority to enter upon public or private premises, using appropriate legal processes, to investigate reports of alleged child abuse, neglect, or dependency.

#### **Applicable Law**

Utah Code Ann. [§62A-4a-409](#). Investigation by division -- Temporary protective custody -- Preremoval interviews of children.

#### Practice Guidelines

A. The CPS caseworker may enter the residence under the following circumstances:

1. When invited by the parent or guardian.
2. If the parent or guardian is not at home: The CPS caseworker may enter the home if invited by a child or temporary caregiver to assess immediate safety and risk factors by asking for basic information about the whereabouts of the parent or guardian, appropriateness of arrangements for care of children, etc. A child or temporary caregiver does not normally have authority to consent to a search or examination of the home.

B. If the CPS caseworker is denied entry into the home and entry into the home is necessary to ensure the safety of a child, the caseworker may:

1. In an emergency summon law enforcement to the home.
2. Consult with an Assistant Attorney General about options to gain entry into the home or access to a child.

## 204 The Investigation: Assessment And Making Informed Decisions

The purpose of assessment is to assist the CPS caseworker during the investigation to determine the immediate protection, safety needs, risks, and services needed by the child and family. The CPS caseworker will consider the issues of enduring safety and permanency (long-term view) in making these decisions and providing all parties with due process of the law.

### 204.1 Assessments And Investigation Tools

#### Major objectives:

- A. The following assessment tools will be used by the CPS caseworker to determine the immediate threats to safety and risk of future harm given the child's vulnerabilities and the protective capacities of the caregiver:
  1. SDM Safety Assessment and SDM Safety Plan if indicated.
  2. SDM Risk Assessment.
- B. In cases involving alleged juvenile perpetrators, the following assessment tools may be used:
  1. Significant Risk Assessment.  
For use in cases involving supported allegations of:
    - Sexual Abuse;
    - Sexual Exploitation;
    - Lewdness;
    - Inappropriate Sexual Conduct.
  2. Serious Physical Abuse Assessment.

#### **Applicable Law**

Utah Code Ann. [§62A-4a-409](#). Investigation by division -- Temporary protective custody -- Preremoval interviews of children.

#### Practice Guidelines

- A. SDM Safety Assessment: The CPS caseworker will complete this assessment tool on every case during the face-to-face contact and enter the information into SAFE by the end of the fifth business day. If threats to safety are identified, an SDM Safety Plan will be developed. (Refer to [Section 202.6](#) for further instructions).
- B. SDM Risk Assessment:
  1. The SDM Risk Assessment will be completed on all initial CPS investigations of child abuse or neglect, including new investigations on

- existing cases using the SDM Definitions to guide them. (Refer to 202.7).  
The finding of the SDM Risk Assessment will be used in formulating an ongoing service plan for supported cases or cases determined to need other child welfare services beyond CPS.
2. Each allegation identified at Intake and any discovered during the investigation will be assessed for each alleged victim.
- C. Significant Risk Assessment: When there is a supported finding of sexual abuse, sexual exploitation, lewdness, or inappropriate sexual conduct involving a juvenile perpetrator, the CPS caseworker will complete the Significant Risk Assessment to determine whether a juvenile is a significant risk to other children or the community.
1. The assessment is not to be used to determine whether the investigation is supported or unsupported; a juvenile does not need to be found a significant risk in order for the case finding to be supported.
  2. The assessment must be based upon the facts of the case that are present during the investigation, not after the minor has been removed from the home or any other intervention that has occurred.
  3. The juvenile's age alone is not a reason for determining the juvenile is not a significant risk.
- D. Serious Physical Abuse Assessment: When there is a supported finding of serious physical abuse involving a juvenile perpetrator, the CPS caseworker will complete the Serious Physical Abuse Assessment to determine whether a juvenile is a significant risk to other children or the community.
- E. When an administrative hearing is requested on a supported case or a case that was substantiated prior to May 6, 2002 involving a juvenile perpetrator or an adult who was a juvenile at the time of the incident, and the Significant Risk Assessment or the Serious Physical Abuse Assessment was not completed, Child and Family Services will be responsible to complete the appropriate assessment based on the facts at the time of the investigation.

## 204.2 Case Staffings

### Major objectives:

The CPS caseworker will obtain direction and support to identify needed interventions, services, and resources for the child and family and for assistance in making casework decisions.

**Applicable Law**

Utah Code Ann. [§62A-4a-105](#). Division responsibilities.

Practice Guidelines

- A. The CPS caseworker will staff with a Child and Family Services supervisor in addition to or in conjunction with other professionals when any of the following apply:
1. When the SDM Safety Assessment indicates that the child is conditionally safe or unsafe.
  2. Unless it would jeopardize the safety of a child, the Child and Family Services caseworker will staff with a Child and Family Services supervisor prior to removal.
  3. If the child, family, or alleged perpetrator is receiving services from Child and Family Services, the case staffing will include the assigned Child and Family Services in-home, **post adoption**, out-of-home, or domestic violence caseworker.
  4. If the family receives assistance in the form of TANF, the case staffing may include the Department of Workforce Services employment counselor or self-sufficiency caseworker.
  5. When there is an allegation of domestic violence or when domestic violence may be a risk factor, the case staffing will include a Child and Family Services domestic violence caseworker, if available. The CPS caseworker may make an exception to CPS requirements (such as unscheduled home visits, face-to-face contact with the child, etc.) when it is determined to be a safety concern based on the immediate threats to safety, threats of harm, and risk of future harm given the child's vulnerabilities, and the protective capacities of the caregiver and following a staffing with the Child and Family Services supervisor and Child and Family Services domestic violence caseworker. Supervisor approval and documentation is required.
  6. When the child is identified as Native American and the case may be screened for court involvement, the CPS caseworker will review the case with the Child and Family Services supervisor and the Indian Child Welfare state specialist.
  7. When an infant has been exposed to or is dependent upon harmful substances as a result of the mother's use of illegal substances or abuse of prescribed medications during pregnancy, the CPS caseworker will staff the case with an Assistant Attorney General.
  8. When there is a fatality or near fatality that is the result of non-accidental trauma or the manner of death is undetermined by law enforcement or medical professionals and there are surviving siblings, the case will be

- 2421                   staffed jointly with a Child and Family Services supervisor, region director,  
2422                   and an Assistant Attorney General within 24 hours of first knowledge of  
2423                   the incident. This review does not change the priority time frame of the  
2424                   investigation.
- 2425           9.       When there is a need to coordinate the efforts of several investigators,  
2426                   agencies, or others toward the common goal of protection of the child.
- 2427           10.      When there is a supported finding of chronic/severe physical, sexual or  
2428                   emotional abuse, or chronic/severe neglect or medical neglect resulting in  
2429                   death, disability, or somber illness the CPS caseworker will staff with a  
2430                   Child and Family Services supervisor and an Assistant Attorney General.
- 2431           11.      When there has been a prior adjudicated finding of child abuse, neglect, or  
2432                   dependency relevant to new supported findings of abuse, neglect, or  
2433                   dependency, the CPS caseworker will staff with a Child and Family  
2434                   Services supervisor to discuss the threats of harm, the child's  
2435                   vulnerabilities, and the protective capacities of the caregiver available. The  
2436                   CPS caseworker and supervisor will make a safety decision based on the  
2437                   information gathered. If the safety decision made identifies that there is an  
2438                   imminent threat of harm that cannot be mitigated without court  
2439                   involvement, the CPS caseworker will staff the case with an Assistant  
2440                   Attorney General.
- 2441           12.      When there is a supported finding of drug production or manufacturing,  
2442                   the CPS caseworker may staff with a Child and Family Services supervisor  
2443                   as described in 10 above. If a safety decision is made that requires law  
2444                   enforcement and/or an Assistant Attorney General, the CPS caseworker  
2445                   will discuss with them the safety decision made to determine what needs  
2446                   to occur to ensure enduring safety and permanency for the child.
- 2447           13.      When there are siblings in the same home where a removal is considered,  
2448                   the CPS caseworker will staff with a Child and Family Services supervisor  
2449                   to discuss the threats of harm, the child's vulnerabilities, and the protective  
2450                   capacities of the caregiver for each child in the home. If there is an  
2451                   imminent threat of harm that cannot be mitigated without considering  
2452                   removal, the CPS caseworker will staff the safety decision with an  
2453                   Assistant Attorney General to determine the next steps.
- 2454           14.      When the referral is supported and the family refuses to accept services  
2455                   necessary to ensure the well-being of the child, the CPS caseworker will  
2456                   staff with a Child and Family Services supervisor the threats of harm, the  
2457                   child's vulnerabilities, and the protective capacities of the caregiver in  
2458                   order to make a safety decision. If the threats of harm cannot be mitigated  
2459                   without court involvement, the CPS caseworker will discuss the safety  
2460                   decision and steps to take to ensure enduring safety and permanency for  
2461                   the child with an Assistant Attorney General.



15. **When the referral involves an adopted child whose parents are not able to meet the child's needs, post adoption will be brought into the staffing to help determine if services could defer the child coming into custody.**  
[15.]16. When the CPS caseworker needs legal advice concerning the sufficiency of the evidence to make a supported finding or to pursue a substantiated finding, the CPS caseworker will staff with a Child and Family Services supervisor and Assistant Attorney General. [See: Utah Code Ann. [§62A-4a-202.1.](#)]

### 204.3 Sibling Or Child At Risk

Major objectives:

The CPS caseworker will assess the threats of harm, the child's vulnerabilities, and the protective capacities of the caregiver of siblings/children who may be at risk when a child in the same home has been a victim of abuse, neglect, or dependency. A child living in or visiting the same household may not be removed from their home unless the child living in the same household has also been determined to be at "substantial risk" of being physically or sexually abused or neglected. Assessment and documentation must be specific for each child. Siblings/children may be at risk when the alleged perpetrator is a parent or a member of the parent's household.

**Applicable Law**

Utah Code Ann. [§78A-6-302](#). Court-ordered protective custody of a minor following petition filing -- Grounds.

Practice Guidelines

- A. In cases where the mother is pregnant and delivers the newborn and the newborn's siblings are in custody, or have been determined to be abused, neglected, or dependent, the CPS caseworker will complete a new SDM Safety Assessment.
- B. The CPS caseworker will complete the following with each sibling or child to determine if the sibling or child requires immediate protection or services:
1. Complete the SDM Safety Assessment.
  2. Conduct a face-to-face interview with each child having verbal or other communication skills or observe non-verbal children.
  4. An SDM Safety Plan will be completed when the SDM Safety Assessment determines that the child is conditionally safe. If law enforcement objects to a Child and Family Services investigation (for example, in a child fatality investigation), the CPS caseworker will review the case with the Attorney



General's Office to determine legal options to ensure the safety of other siblings.

## 204.4 Coordination With Law Enforcement

### Major objectives:

Child and Family Services will coordinate with law enforcement to protect children and families when abuse, neglect, or dependency is alleged. This coordination will also serve to protect CPS caseworkers and keep the peace throughout the investigation.

### **Applicable Law**

Utah Code Ann. [§62A-4a-409](#). Investigation by division -- Temporary protective custody -- Preremoval interviews of children.

### Practice Guidelines

The CPS caseworker will coordinate with law enforcement in the following ways:

- A. Notification: If, during the course of the investigation, the CPS caseworker becomes aware of criminal activity, law enforcement will be notified.
- B. Child placed into protective custody: When a child is to be taken into protective custody, the CPS caseworker will be accompanied by law enforcement if a peace officer is reasonably available.
- C. Entry into the child's home: Neither law enforcement officers nor CPS caseworkers can enter a home uninvited without a search warrant issued by a court unless there is an emergency requiring entry be made without a warrant. If the CPS caseworker is denied entry into the child's home by the parent or caregiver, a request will be made to law enforcement to accompany the CPS caseworker to the home in an attempt to gain entry. Should the parent continue to deny entry, the CPS caseworker will coordinate efforts with law enforcement and the Attorney General's Office to secure a search warrant. [See: Major objectives [Section 203.3](#).]

## 204.5 Domestic Violence Related Child Abuse

### Major objectives:

When children have witnessed domestic violence, Child and Family Services will assess the safety needs of the family and provide interventions and education to the family. CPS caseworkers will respect and support the role of the non-offending caregiver to protect themselves and the child who witnessed domestic violence between the caregiver and abuser.

Cases involving Domestic Violence Related Child Abuse will be reviewed with a Child and Family Services domestic violence worker.

The Domestic Violence Related Safety Plan information and Risk of Danger information for the non-offending adult/caregiver as well as the child are protected records under Utah Code Ann. [§63G-2-305](#) and will not be released when CPS records are requested because such release may pose a danger to the child and/or non-offending caregiver.

### **Applicable Law**

Utah Code Ann. [§62A-4a-105](#). Division responsibilities.

### Practice Guidelines

Upon the identification of Domestic Violence Related Child Abuse, the CPS caseworker or Child and Family Services domestic violence caseworker will proceed as follows:

- A. Investigation: Identify and document in the case record the services, assessments, and education given to the family. These will include:
  1. Assisting the non-offending adult/caregiver by providing them with a list of available resources and supports, educating them on the domestic violence cycle, safety planning with the client, and holding a Risk of Danger discussion to determine the level of lethal risk. Resources should include information on protective orders, domestic violence advocates, financial assistance such as CVR, shelters, crisis nursery, counseling or support groups, etc.
  2. Assisting the offending partner by holding a Risk of Danger discussion, finding support systems, giving treatment resources, safety planning, and educating them on the domestic violence cycle.
  3. Safety planning with child.
  4. Explaining to each caregiver that:
    - a. Immediate and long-range harm may result from exposing a child to domestic violence;

- 2576                    b.        According to Utah State law, a person is criminally liable for  
2577                           committing domestic abuse in the presence of a child;  
2578                    c.        Domestic abuse in the presence of a child is "child abuse" and  
2579                           therefore such conduct may result in juvenile court intervention and  
2580                           an abuse record in the Child and Family Services database.  
2581
- 2582 B.        Protective Order: If the non-offending caregiver has obtained a protective order:  
2583        1.        Notify the Assistant Attorney General of the protective order and request  
2584                    a bifurcated hearing in juvenile court.  
2585        2.        Do not conduct conjoint mediation, Child and Family Team Meetings,  
2586                    treatment planning, service planning, safety planning, or assessments  
2587                    between the protected party and the abuser.  
2588
- 2589 C.        Domestic Violence Shelter: If the caseworker has knowledge that the child and  
2590        non-offending caregiver have relocated to a domestic violence shelter, explain to  
2591        the non-offending caregiver and the domestic violence shelter staff that it is the  
2592        caregiver's and, where appropriate, the domestic violence shelter's responsibility  
2593        to immediately contact the caseworker if they leave the domestic violence  
2594        shelter.  
2595
- 2596 D.        Failure to Protect: When the CPS caseworker and Child and Family Services  
2597        domestic violence caseworker staff a case and agree to make a finding of Failure  
2598        to Protect against the non-offending caregiver, the CPS caseworker will  
2599        document in the case record the reasons for that finding.  
2600
- 2601 E.        Notice of Agency Action (NAA) Letter: This letter will be sent to the offending  
2602        partner in all supported CPS cases within agency timelines (Practice Guidelines  
2603        [Section 204.15](#)). The NAA Letter involving domestic violence related child abuse  
2604        allegations will be sent to the perpetrator of the abuse in the same manner that all  
2605        other agency action letters are sent. Before an NAA Letter is sent, individual  
2606        safety planning to the non-offending partner, children, and offending partner will  
2607        be provided in preparation for the receipt of this letter, due to the possible  
2608        significant risk placed on the non-offending parent and child. The CPS caseworker  
2609        will:  
2610        1.        Notify the non-offending caregiver that the letter will be sent and review  
2611                    safety measures.  
2612        2.        Document this notification in the case record.  
2613
- 2614 F.        Case Requirement and Documentation Exceptions: A CPS caseworker may make  
2615        an exception to CPS requirements for documentation when it is determined to be  
2616        a safety concern (such as unscheduled home visits, priority timeframes on the  
2617        face-to-face contact with the adult victim or child, etc.). Prior to making that

decision, staff with a Child and Family Services supervisor and domestic violence caseworker for agreement that those requirements could pose a potential threat of harm to the child or non-offending caregiver. Documentation of staffing and approval are required.

- G. Family/Friend Disturbance: An altercation between extended family members or other non-related adults in the presence of a child may be considered emotional abuse and not domestic violence, if it is determined to have:
1. Elements that meet the definition of Emotional Abuse.
  2. Does not involve a pattern of domestic violence power and control.
- H. Homicide/Suicide: Child and Family Services will respond to situations in which there has been a homicide and/or suicide as a result of domestic violence when either party has children that were living with them at the time, whether or not the children witnessed or were present during the incident. These referrals will be assigned and conducted as a DVS or CPS case according to [Section 201.4](#).

## 204.5a Environmental Neglect

### Major objectives:

Child and Family Services will respond to concerns about the child's home environment when there is reason to believe that there is a threat to a child's physical health or safety due to possible neglect or abuse. The Child and Family Services caseworker will respond to these allegations using positive engagement skills and a solution-focused view.

### **Applicable Law**

Utah Code Ann. [§62A-4a-105](#). Division responsibilities.

### Practice Guidelines

These Practice Guidelines provide parameters for the CPS caseworker to follow in the various circumstances possible when there are concerns related to the child's environment. The assessment will determine whether the environment poses a threat to the physical health or safety of the child. The CPS caseworker may contact other community resources and/or evaluators to determine if and to what degree the environment poses a safety threat to the child. If necessary, the CPS caseworker will provide assistance and education for enhancing safety and preventing the reoccurrence of the neglect. The assessment will include the following.

- A. The CPS caseworker will use positive engagement skills with the family and complete an unscheduled home visit to assess the environment.

- 
- 2659 B. The CPS caseworker will assess whether the environment is safe for the children  
2660 involved, considering:
- 2661 1. Threats of harm:
- 2662 a. Duration or length of the situation (chronic).
- 2663 b. Volume, quantity, or toxicity of the potential hazard.
- 2664 c. Severity of the threat to the child.
- 2665 d. Child's access to the potential hazards.
- 2666 2. Child's vulnerabilities:
- 2667 a. The age of the child.
- 2668 b. The developmental level of the child.
- 2669 c. The medical condition of the child.
- 2670 3. Protective capacities of the caregiver:
- 2671 a. Level of parental involvement and protective capacities.
- 2672 b. Other expert opinions (health department, pharmacist, doctor,  
2673 zoning, fire department, etc.).
- 2674 c. The extent to which the child's extended family may provide needed  
2675 protection.
- 2676
- 2677 C. The CPS caseworker will assess whether the environment poses safety concerns.  
2678 The CPS caseworker will team with the family to access services or interventions  
2679 that will address the safety issues.
- 2680
- 2681 D. Service and education resources and/or on-site assessment contacts may include,  
2682 but are not limited to, the following:
- 2683

2684

Concerns	Agency/Resources	Assessment, Education, or Services
Pest infestation, sewage/ water issues, urine/ feces	Health Department	Pest infestation, repair/ cleanup/ health
Heat issues, safe heat sources, carbon monoxide	Gas Company	Gas/ carbon monoxide issues, HEAT program assistance
Fire/ electrical dangers	Fire Department	Fire/ electrical dangers and safety code
Sewage/ water issues, lack of access to water	Water Department	Water/ sewage issues
Issues that exacerbate medical conditions (mold, smoke, effects of dangers/ hygiene on medical condition)	Physician or Medical Assistance	Environmental impact on medical condition
Lack of access to food	Food Assistance Program	Subsidizing or providing education on food and nutrition
Poisonous/ toxic chemicals	Poison Control	Exposure to toxic/ poisonous chemicals
Only spoiled foods are available, choking hazards, hygiene, nurturing, housecleaning issues	Parent Education and Advocacy	Safe and healthy parenting
Health and safety issues regarding animals or dangerous animal issues	Animal Control	Containment of excessive or dangerous animals
Drugs, paraphernalia, drug labs	Law Enforcement	Cleanup of drugs, drug labs, or paraphernalia
Access to firearms/ ammunition, danger of firearms issues	Firearm Safety Education	Firearm safety
Dangerous structural issues, construction, code violations	Health Department and Zoning	Dangerous structural, construction, code violation
Cleanup assistance, respite, safety plan monitoring, provisions, financial assistance	Kin, church, neighbors, crisis nursery, or other community agencies	Formal and informal supports

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2686

2687

The CPS caseworker may find services and/or agencies by calling 211 or accessing the United Way website at <http://www.uw.org/211/>.

## 204.6 False Allegations Of Child Abuse Or Neglect

### Major objectives:

If Child and Family Services determines that an individual has knowingly submitted a false report of child abuse or neglect, the CPS caseworker will consult with law enforcement.

### **Applicable Law**

Utah Code Ann. [§62A-4a-1007](#). False reports -- Penalties.

### Practice Guidelines

- A. At the conclusion of a CPS investigation, the CPS caseworker will determine (after consultation with the Attorney General's Office, if needed):
  1. Whether the referent's allegation of child abuse or neglect was false.
  2. Whether it is more likely than not that the referent knew, at the time of making the allegation, that the allegation was false.
  3. Whether the referent has knowingly made a prior false allegation about the same alleged victim or alleged perpetrator.
  4. Whether the referent's address is known or reasonably available.
- B. If the CPS caseworker finds that the referent probably knew, at the time of making the allegation, that the allegation was false, and that the referent has knowingly made a prior false allegation about the same alleged victim or alleged perpetrator, the CPS caseworker will:
  1. Inform and consult with law enforcement regarding the false allegations made by the referent and determine whether informing the alleged perpetrator about the false allegations is likely to jeopardize law enforcement efforts or the health or safety of any individual.
  2. Inform the alleged perpetrator about the false allegations made by the referent, to the extent that such disclosure does not unreasonably jeopardize law enforcement efforts or the health and safety of individuals.
- C. If the CPS caseworker finds that the referent probably knew, at the time of making the allegation, that the allegation was false, and if the referent's address is available, the CPS caseworker will send the referent a certified letter that informs the referent that:
  1. The CPS caseworker has investigated the referent's allegation of abuse or neglect and has determined that the allegation was false and that the referent probably knew that the allegation was false at the time of making the allegation.



2. Utah Code Ann. [§76-8-506](#) and other laws impose criminal and civil penalties for knowingly making a false allegation of abuse or neglect.
3. CPS has a statutory obligation to inform law enforcement and the alleged perpetrator.

## 204.7 Child Fatalities And Near Fatalities

### Major objectives:

Upon report of a child fatality, the CPS caseworker will notify law enforcement, Child and Family Services administration and DHS administration and take necessary steps to ensure that any other children in the household are safe. Upon report of a near fatality, the CPS caseworker will notify the Safe and Healthy Families Team at Primary Children's Medical Center.

### **Applicable Law**

Utah Code Ann. [§62A-4a-405](#). Death of child -- Reporting requirements.

Utah Code Ann. [§62A-16-201](#). Fatality Review Act.

### Practice Guidelines

- A. The CPS caseworker will immediately notify law enforcement, the Child and Family Services director or designee, and the Fatality Review Coordinator when a client on an open CPS case dies:
  1. All notifications will occur within 24 hours of first knowledge of a death and may be accomplished through phone calls, e-mail, or written communication and will be documented in the activity recording.
  2. A Deceased Client/Employee Report form will be completed by the CPS caseworker and a notice will be sent to the Child and Family Services director and Fatality Review Coordinator within three days of knowledge of the fatality.
- B. Upon a report made to Child and Family Services on a child death determined to be a result of child abuse or neglect or when the cause of death is undetermined and wherein there are surviving siblings, the CPS caseworker will also immediately notify the region director or designee. Notification may be accomplished through phone calls, e-mail, or written communication and will be included in the activity recording. The CPS caseworker will assess siblings and children at risk.
- C. Within seven days of the date that a report is made to Child and Family Services of the death of a child whose family has received any child welfare services within the year preceding the date of the death, the caseworker will fill out the Deceased Client /Employee Report found in SAFE. The caseworker will submit

the report to the region director or designee, and the region director or designee will submit the information to the DHS child fatality review coordinator within those same seven days.

## 204.8 Extension Granted To A CPS Investigation

### Major objectives:

If an investigation cannot be completed within 30 days from the disposition of the case to CPS, the CPS caseworker will make a request for an extension prior to expiration of the initial 30-day period.

### **Applicable Law**

Utah Code Ann. [§62A-4a-105](#). Division responsibilities.

### Practice Guidelines

- A. The region director or designee may grant one extension of up to 30 days when there is insufficient information available to make a case finding.
- B. An extension will not be granted by the region director or designee for overdue documentation.
- C. An additional extension of 30 days may be requested where extenuating circumstances exist.

## 204.9 Unable To Locate Within The State Of Utah

### Major objectives:

A CPS caseworker will close an investigation as Unable to Locate after reasonable efforts have been made by the caseworker to locate the child and family members.

### **Applicable Law**

Utah Code Ann. [§62A-4a-105](#). Division responsibilities.

### Practice Guidelines

A finding of Unable to Locate can be made only when reasonable efforts have been completed.

- A. Reasonable efforts include (but are not limited to):
  - 1. Visiting the home at least twice at times other than normal work hours.
  - 2. Contacting local schools for additional contact and address information

3. Contacting local and county law enforcement agencies to gain any additional address information.
  4. Checking public assistance records for additional address or contact information.
  5. Checking with the referent for additional address information.
  6. Send the name and any other information regarding the family to the CLEAR (kin locator) license holder in the region for an internet search for additional address information
- B. Prior to making a finding of Unable to Locate, the caseworker will document and follow-up on any new information from the above sources regarding the whereabouts of the child and family. If additional address information is found, the CPS caseworker will make visits to that address in order to find the child.
- C. No face-to-face contact can be conducted on an Unable to Locate case. If the caseworker has completed a face-to-face on the case and cannot subsequently locate the family, see practice guideline 204.9a, Unable to Complete.

## 204.9a Unable To Complete

### Major objectives:

The CPS caseworker will close an investigation as Unable to Complete only if reasonable efforts have been made to pursue the assessment and there is insufficient information to make a finding.

### **Applicable Law**

Utah Code Ann. [§62A-4a-105](#). Division responsibilities.

Utah Code Ann. [§62A-4a-409](#). Investigation by division -- Temporary protective custody -- Preremoval interviews of children.

### Practice Guidelines

Reasonable efforts have been made if one of the following situations exists:

- A. Face-to-face may or may not have occurred, and all of the following apply:
1. Whereabouts of the child and family are known but the parent/guardian refuses to allow the child to be seen and/or interviewed;
  2. The caseworker has contacted the police for assistance, but the police have been unsuccessful in attempts to assist the caseworker in seeing the child;
  3. The caseworker has contacted an Assistant Attorney General to staff whether a warrant or petition can be obtained with the information

- 2850 available, but it was determined that a warrant or petition was not  
2851 appropriate;  
2852 4. There is insufficient information to make a finding.  
2853  
2854 B. No face-to-face has occurred, and the following apply:  
2855 1. The child and/or family move outside the state, whereabouts known (note:  
2856 if whereabouts of the child and family are unknown, fulfill the  
2857 requirements of practice guideline 204.9, Unable to Locate, and close the  
2858 case as Unable to Locate);  
2859 2. A request for courtesy work is requested and declined;  
2860 3. The caseworker cannot complete the assessment through telephone or  
2861 other contact with the family or collaterals;  
2862 4. There is insufficient information to make a finding.  
2863  
2864 C. A face-to-face has occurred, and one of the following apply:  
2865 1. The child and family moved out-of-state, whereabouts known:  
2866 a. A request for courtesy work is requested and declined;  
2867 b. The caseworker cannot complete the assessment through telephone  
2868 or other contact with the family or collaterals;  
2869 c. There is insufficient information to make a finding.  
2870 2. The child and family moved, whereabouts unknown:  
2871 a. The child and/or family have moved;  
2872 b. The whereabouts of the child and/or family are unknown;  
2873 c. The caseworker has fulfilled the requirements of practice guideline  
2874 204.9, Unable to Locate;  
2875 d. There is insufficient information to make a finding.  
2876

## 204.10 Case Findings

### Major objectives:

At the conclusion of a CPS investigation, a finding will be made for each allegation identified at the time of Intake or identified during the investigation. Each alleged victim in the case will be linked to a specific allegation or allegations and to an alleged perpetrator or alleged perpetrators.

### **Applicable Law**

Utah Code Ann. [§62A-4a-105](#). Division responsibilities.

### Practice Guidelines

- A. Acceptable findings include:
1. Supported.
  2. Unsupported.

- 
- 2892 3. Without Merit.
- 2893 4. Unable to Locate.
- 2894 5. Unable to Complete Investigation.
- 2895 6. False Report.
- 2896
- 2897 B. Case findings are determined as follows:
- 2898 1. A case finding of Supported will be used when there is reasonable basis to
- 2899 conclude that abuse, neglect, or dependency occurred, even if the alleged
- 2900 perpetrator is unknown.
- 2901 a. A finding of chronic/severe will be considered when a child was
- 2902 taken into protective custody or protective action was pursued
- 2903 through the juvenile court or any time the circumstances meet the
- 2904 definition of chronic/severe abuse or neglect.
- 2905 **b. An adopted child in need of services that cannot be met by their**
- 2906 **parents will be categorized as Dependency. The CPS caseworker**
- 2907 **will assess during the investigation whether the circumstances**
- 2908 **require allegations of abuse or neglect to be added to the Child**
- 2909 **Abuse Neglect Report.**
- 2910 2. A case finding of Unsupported will be used when there is insufficient
- 2911 evidence to conclude that abuse, neglect, or dependency occurred.
- 2912 3. A case finding of Without Merit will be used when there is evidence that
- 2913 abuse, neglect, or dependency did not occur or that the alleged perpetrator
- 2914 was not responsible.
- 2915 4. A case finding of Unable to Locate will be used in the following two
- 2916 situations: a) The CPS caseworker was unable to complete the face-to-
- 2917 face contact with the alleged victim and b) The CPS caseworker made all
- 2918 reasonable efforts to locate the child and was unable to do so.
- 2919 5. A case finding of Unable to Complete Investigation will be made when the
- 2920 child and/or family move outside the state and a request for courtesy work
- 2921 is requested and declined and there is insufficient information to make a
- 2922 finding, or when the child and/or family move outside the state after the
- 2923 face-to-face contact is made with the child and there is insufficient
- 2924 information to make a finding because the whereabouts of the child and/or
- 2925 family are unknown, or when the child and/or family move within the state,
- 2926 the face-to-face with the child was made but there is insufficient
- 2927 information to make a finding and the whereabouts of the child and/or
- 2928 family are unknown.
- 2929 6. A case finding of False Report will be made when the Child and Family
- 2930 Services caseworker finds that the report of abuse, neglect, or dependency
- 2931 was made by a referent who "more likely than not knew that the report
- 2932 was false at the time the person submitted the report."
- 2933

- 
- 2934 C. The case finding decision may be based on the child's statements alone;  
2935 corroborating evidence will not be required in all cases.  
2936
- 2937 D. If the case is supported, the following will be documented in the activity record:  
2938 1. The major objectives definition of the supported allegation.  
2939 2. An explanation of how the facts of the case match the major objectives  
2940 definition of any supported allegation, including the threats of harm, the  
2941 child's vulnerabilities, and the protective capacities of the caregiver.  
2942
- 2943 E. The opinion of the alleged victim's primary care physician, a licensed physician or  
2944 physician's assistant, or nurse practitioner working under the direction of a  
2945 physician will be requested in situations outlined in [Section 202.9](#).  
2946
- 2947 F. If the case is supported, the CPS caseworker will provide a certified Notice of  
2948 Agency Action letter and other relevant forms to the alleged perpetrator within  
2949 five working days of the case closure.  
2950
- 2951 G. The CPS caseworker will provide a Notice of Agency Action letter to the  
2952 perpetrator or legal guardian if the perpetrator is a juvenile through personal  
2953 service by a third party not involved in the action (documenting date, time,  
2954 manner, and location of service) if a supported finding of one of the following  
2955 exists: sexual abuse, lewdness, sexual exploitation, chronic/severe physical or  
2956 emotional abuse or chronic/severe neglect or medical neglect resulting in death,  
2957 disability, or serious illness. [See: Utah Rules of Civil Procedure [Rule 4](#).]  
2958
- 2959 H. A case finding of Unsupported will not be made solely because the alleged  
2960 perpetrator was an alleged out-of-home perpetrator or because the CPS  
2961 caseworker was unable to identify the alleged perpetrator when the evidence  
2962 shows that abuse, neglect, or dependency occurred.  
2963
- 2964 I. The determination of acceptable findings will be based on the facts of the case  
2965 obtained at the time of the investigation.  
2966
- 2967 J. An allegation will not be considered Unsupported or Without Merit because the  
2968 family corrected the conditions that caused the abuse, neglect, or dependency  
2969 while the investigation was pending.  
2970
- 2971 K. The conclusions of the health care professional regarding non-accidental injury,  
2972 sexual abuse, or medical neglect will be considered by the CPS caseworker in  
2973 making case findings. Child and Family Services and the family may obtain a  
2974 second opinion. If the family requests a second opinion, they must do so at their  
2975 own expense.

- L. Chronic/severe child abuse or neglect in [Section 204.11\(A\)](#) does not include a person's conduct that:
1. Is justified under Utah Code Ann. [§76-2-401](#) regarding the use of reasonable and necessary physical restraint or force by an educator.
  2. Constitutes the use of reasonable and necessary physical restraint or force in self-defense or otherwise appropriate to the circumstances to obtain possession of a weapon or other dangerous object in the possession or under the control of a child or to protect the child or another person from physical injury.

## 204.11 Court Findings

### Major objectives:

If Child and Family Services makes a supported finding of one or more of the chronic or severe types of child abuse or neglect, Child and Family Services will:

- A. Enter the information into the SAFE system. SAFE will be responsible to report the appropriate information to Licensing, without identifying the person as a perpetrator or alleged perpetrator.
- B. If Child and Family Services makes a decision to seek a court finding of Substantiated, they will file a petition with the juvenile court regarding the Supported finding of abuse or neglect. If a case is Supported, Child and Family Services will send a certified Notice of Agency Action to the alleged perpetrator regardless of the decision to file a petition for a court finding of Substantiated. Only those categories of abuse or neglect listed in Section A may be considered for a court finding of Substantiated.

### **Applicable Law**

Utah Code Ann. [§78A-6-323](#). Additional finding at adjudication hearing -- Petition -- Court records.

### Practice Guidelines

- A. The types of child abuse or neglect that may require Child and Family Services to seek a petition for a court finding of Substantiated are as follows:
  1. Chronic/Severe Physical Abuse;
  2. Sexual Abuse;
  3. Sexual Exploitation;
  4. Abandonment;
  5. Medical Neglect resulting in death, disability, or serious illness;



- 6. Chronic/Severe Neglect; or
  - 7. Chronic/Severe Emotional Abuse.
- B. Upon the filing of a petition, the juvenile court will be asked to make a finding of Substantiated, Unsubstantiated, or Without Merit.
- C. Any action taken by the agency does not preclude further civil or criminal action.

## 204.12 Changing A Finding On A Closed Case

### Major objectives:

A previously closed CPS case can be reopened to allow an amendment to the case finding.

### **Applicable Law**

Utah Code Ann. [§62A-4a-105](#). Division responsibilities.

### Practice Guidelines

- A. A CPS supervisor can reopen a CPS case to amend the finding and include new information in the activity recording within 60 days of original case closure.
- B. After 60 days from case closure, the region director may approve reopening a closed CPS case to amend the finding and include new information in the activity recording. The request may be based upon obtaining new information relevant to the facts at the time the case was investigated, or when the juvenile court's ruling is not consistent with the original finding.
- C. If an Unsupported finding is amended to Supported, the CPS caseworker or Child and Family Services supervisor will:
- 1. Document the new information and all consultations held on the case in the activity recording.
  - 2. Enter the amended finding into SAFE and complete all the requirements for case closure. [See: [Section 204.15](#).]
- D. If the previous finding is amended from Supported to Unsupported, the CPS caseworker or Child and Family Services supervisor will:
- 1. Document the new information and consultations held on the case in the activity recording.
  - 2. Send a letter that outlines or states the newly obtained information for which an amendment of the original case finding is being made.
  - 3. Ensure that a GRAMA request is provided to the alleged perpetrator.

4. Enter the amended finding into SAFE.

## 204.13 Documentation Of Investigation

### Major objectives:

The CPS caseworker will record details and sequential casework activities and information obtained on an open CPS investigation.

### **Applicable Law**

Utah Code Ann. [§62A-4a-105](#). Division responsibilities.

### Practice Guidelines

CPS documentation will include, but is not limited to, the following:

- A. The date, time, place, and type of casework activity being completed. The specific source of information and statements regarding credibility of the source will be documented.
- B. A complete description of all casework activities and the rationale for conclusions made, which may include the following unless an exception applies and is documented:
  1. Review of information contained in all prior Child and Family Services records.
  2. Review of any Additional Information reports added to the case by Intake. Any new allegations will be added to the case.
  3. Results of the SDM Safety Assessment and Risk Assessment and the SDM Safety Plan, if applicable.
  4. Unscheduled and scheduled home visits, including documentation of the conditions of the residence and/or the specific areas of the home the CPS caseworker observed.
  5. Support person offered and the identity of the support person participating, or that the child declined the inclusion of a support person.
  6. Face-to-face contact with the alleged victim within the priority response time frame.
  7. Interviews with the child that include statements made regarding the specific allegations or incidents of abuse, neglect, or dependency; the child's statements as to the threats of harm, the child's vulnerabilities, and the protective capacities of the caregiver; and any other information deemed important to the investigation.
  8. Interview of the alleged perpetrator(s) and any admissions or denials to the allegations.

9. Interview with the parents or guardian, including statements made about safety planning, the protective capacities of the caregiver, the threats of harm, and the child's vulnerabilities.
10. All collateral or third party contacts, including the referent if they have first-hand knowledge of the alleged abuse, neglect, or dependency.
11. All case staffings, the identity of persons participating in the staffing, and any decisions made.
12. Missed priorities.
13. Extensions requested with documentation of the approval for the extension.
14. The appropriate closure notification provided to the referent, which includes law enforcement.
15. Notice of Agency Action sent or served to the alleged perpetrator that includes the appropriate blank forms for a GRAMA Request and Request for Administrative Hearing.
16. The caseworker will summarize in the activity logs all third party documents used to make a final disposition on a CPS case. These documents will be included as part of the closed CPS case file.

## 204.14 Determination Of A CPS Case For Ongoing Services

### Major objectives:

Every child and family with protection or safety needs, or who are at continued risk, will be considered for ongoing services through Child and Family Services or community partners. The decision for services is made using the results of the SDM Risk Assessment.

### **Applicable Law**

Utah Code Ann. [§62A-4a-105](#). Division responsibilities.

Administrative Rule [R512-100](#). In-Home Services.

### Practice Guidelines

The SDM Risk Assessment identifies the level of risk of future maltreatment. The risk level guides the decision to close a referral or open an ongoing case.

Final Risk Level	Recommendation
Low	Do Not Open*
Moderate	Do Not Open*
High	Open
Very High	Open

\*Low and moderate risk cases should be opened if the most recent SDM Safety Assessment finding was conditionally safe or unsafe.

For cases opened for ongoing services following the investigation, the risk level is used to determine the contact requirements for the case (service level).

After calculating the scored risk level, determine if any overrides apply.

Mandatory overrides. Mandatory overrides reflect the seriousness of the incident and child vulnerability concerns and have been determined by Child and Family Services to be cases that warrant the highest level of service regardless of the scored risk level. If the scored risk level is low, moderate, or high, review the mandatory override conditions to see if any apply. Mark any mandatory override reasons that are present. The final risk level is then increased to very high.

- Sexual abuse victims in this case AND perpetrator is likely to have access to child. One or more of the children in this household are victims of sexual abuse and actions by the caregivers indicate that the perpetrator is likely to have access to the child, resulting in danger to the child.
- Non-accidental injury to a child younger than 36 months old. Any child under the age of 36 months in the household has a physical injury resulting from the actions or inactions of a caregiver.
- Serious non-accidental injury. Any child in the household has a serious physical injury resulting from the action or inaction of the caregiver. The caregiver caused serious injury, defined as brain damage, skull or bone fracture, subdural hemorrhage or hematoma, dislocations, sprains, internal injuries, poisoning, burns, scalds, severe cuts; and the child requires medical treatment.
- Previous termination of parental rights. The court has terminated parental rights for either caregiver due to abuse or neglect at any time in the past.
- Caregiver(s) action or inaction resulted in death of a child due to abuse or neglect (previous or current). Any child in the household has died as a result of actions or inactions by the caregiver. This child death may be in the current incident or investigation, or may have occurred at any time in the past.

Discretionary override: A discretionary override is applied by the social worker to increase the risk level in any case where the social worker believes the scored risk level is too low. This should represent a unique situation not considered elsewhere on the risk assessment that increases the likelihood of a future incident of child maltreatment in this household. Discretionary overrides may only increase the risk level by one level (e.g., from low to moderate, or moderate to high, but NOT low to very high). Use of a discretionary override means there is a clinical judgment that the likelihood of future harm is higher than scored, and requires a reason, supervisory consultation, and approval. Supervisor approval of the discretionary override is indicated when the supervisor reviews and approves the risk assessment.

**Planned Action:** If the planned action to open or not open an ongoing case differs from the recommended action, provide an explanation in the SDM Risk Assessment.

## 204.15 Case Closure

### Major objectives:

A CPS case will be closed no later than 30 days from disposition of the case by Intake to CPS. [See: [Section 204.8](#), Extension Granted To A CPS Investigation.]

### **Applicable Law**

Utah Code Ann. [§62A-4a-105](#). Division responsibilities.

### Practice Guidelines

The CPS caseworker will complete the following prior to case closure:

- A. Complete activity recording and documentation in SAFE.
- B. Finalize all SDM Safety Assessments and SDM Risk Assessments.
- C. Ensure that supporting documents such as safety plans and agreements, letters, forms, law enforcement reports, medical reports, etc. are contained in the file.
- D. Determine the case finding and if the case is supported, the following will be documented in the activity recording and closure statement:
  1. The facts, evidence, and rationale that support the findings of the case.
  2. A summary of the initial threats to safety, threats of harm, and risk of future harm given the child's vulnerabilities, and the protective capacities of the caregiver at the opening of the case and if/how any have changed by the end of the case. Use multiple SDM Safety Assessments to document the change. If threats to safety were identified in the SDM Safety Assessment, document the Safety Plan put in place to address them.
- E. In conjunction with the Child Abuse Prevention and Treatment Act (CAPTA) requirements (Public Law [108-446](#), Section 637(a)(6)), any child 34 months or younger, with a supported finding of abuse or neglect, will be automatically referred to the Department of Health's Baby Watch Early Intervention Program (BWEIP). SAFE will send a list of all children meeting these criteria to BWEIP. A letter will be automatically generated and sent to the parents or guardians of the child to inform them of the referral.

- (1) The CPS caseworker will ensure all parent/guardian information is current in SAFE, including name, address, and contact information.

- F. If the case is supported for sexual abuse, lewdness, sexual exploitation, chronic/severe physical abuse, chronic/severe emotional abuse, chronic/severe neglect or medical neglect resulting in death, disability, or serious illness, staff with an Assistant Attorney General and determine if a petition should be filed in juvenile court to request a substantiated finding.
- G. Provide written or verbal notification of the case closure to the referent, unless anonymous, within five working days of the case closure.
- H. If the case is supported, send or initiate service of the Notice of Agency Action and other relevant forms to the alleged perpetrator within five working days of the case closure, unless law enforcement requests that this information be held based upon the likelihood that releasing that information would jeopardize a pending investigation. If such a request is made by law enforcement, caseworkers may place the information on hold until such time as law enforcement has completed its investigation. Once the investigation is completed by law enforcement, the caseworker will send the information to the alleged perpetrator.

## 204.16 Reopening CPS Cases

### Practice Guidelines

Cases will not be closed prior to all the work on the case being completed and documented. In the event changes to the case are necessary after the case has been closed, the following procedures will be followed.

- A. **Fixing Errors.** When fixing errors to logs in a closed CPS case, the case will not be reopened. A new log will be added to make note of the error and add the correct information. The date of the log will reflect the date the new log was created.
- B. **Adding Information.** When adding information or completed items on a closed CPS case, the case will not be reopened. A log will be added to document the information. The date of the log will reflect the date the new log was created. The date the item was actually completed can be documented in the log if it is different than the date the log was entered.
- C. **Items Needing to be Completed.** If additional work needs to be completed on a closed CPS case, the case should be reopened and the appropriate items

completed. If possible, the case will be extended until the work is completed and appropriately documented. If an extension is not possible, the items needing to be completed will be completed and appropriately documented as quickly as possible. The reason the case was reopened will be clearly documented.

- D. Changing Allegations ([Section 204.12](#)). If additional information is brought forward after a case has been closed, which would change the finding(s) of the allegations investigated, the case will be reopened. This would not include new allegations or allegation changes due to an Internal Review, Administrative Hearings, or Judicial Reviews.
1. The finding will be changed.
    - a. With the documented permission of the CPS caseworker's supervisor, the SAFE Helpdesk will be contacted to reopen the case. After 30 days, region director permission is required.
    - b. A log will be added to provide an explanation for the change to the allegation(s). The explanation will include the new information that led to the change being made.
    - c. The Allegation Description Text will be updated to reflect the changed allegation and the information that led to the change being made.
    - d. The case will be re-closed with the original date of closure.
    - e. If the finding is changed to Supported, a NAA letter will be sent to the perpetrator.
    - f. If the finding is changed to Unsupported, a letter will be sent to the alleged perpetrator to notify them of the change.



## 205 Removals: Safety And Permanency Considerations

This section provides guidance for CPS caseworkers who must remove a child from their home.

### 205.1 Grounds For Removal/Placement Of A Child Into Protective Custody

#### Major objectives:

The Child and Family Services caseworker will obtain a warrant from a court of competent jurisdiction to facilitate the removal and subsequent placement of a child into protective custody, unless there are exigent circumstances that demonstrate a substantial, immediate threat to the health or safety of a child, unless a court order to remove is already in place, or unless a parent gives consent for removal. A Child and Family Services worker may not take a child into protective custody on the basis of mental illness or poverty of the parent or guardian or on the basis alone of educational neglect. A Child and Family Services worker may not take a child into protective custody when motivated solely by intent to seize or obtain evidence unrelated to the potential abuse or neglect allegation.

The CPS caseworker will use the SDM Safety Assessment to determine if the child is unsafe. If the child is determined to be unsafe, then the Child and Family Services CPS caseworker will review the reasons for removal and other available options with a supervisor or other personnel designated by the region director and an Assistant Attorney General. [See: [Section 208.1](#) for ICWA procedures]

#### **Applicable Law**

Utah Code Ann. [§62A-4a-202.1](#). Entering home of a minor -- Taking a minor into protective custody -- Caseworker accompanied by peace officer -- Preventive services -- Shelter care or emergency kinship.

#### Practice Guidelines

The following have authority to place a child into protective custody:

- A. A court of competent jurisdiction issuing a warrant.
- B. A Child and Family Services caseworker, without a warrant, in accordance with the exigent circumstance requirements of Utah Code Ann. [§62A-4a-202.1](#).
- C. A law enforcement/peace officer.

D. A physician or person in charge of a medical facility may place the child on a medical hold for up to 72 hours.

A child may be removed from the custody of parents or guardians without a warrant from a court of competent jurisdiction and placed into protective custody when a parent or guardian consents, or when one or more of the following circumstances exist:

A. There is imminent danger to the physical health or safety of the minor, and the health or safety of the minor may not be protected without removing the minor from the custody of the minor's parent or guardian.

B. There is substantial risk to the minor of being physically or sexually abused by a parent, guardian, or another person known to the parent or guardian.

C. The parent or guardian is unwilling to have physical custody of the minor.

D. The minor has been abandoned without provision for the minor's support.

E. The parent or guardian has been incarcerated or institutionalized and has not arranged or cannot arrange for safe and appropriate care for the child.

F. A relative or other adult custodian with whom the parent or guardian has left the child is unwilling or unable to provide care or support for the child, and the whereabouts of the parent or guardian are unknown, and reasonable efforts to locate the parent or guardian have been unsuccessful.

G. An infant has been abandoned, as defined in Utah Code Ann. [§78A-6-316](#).

#### Warrant Request

A warrant may be requested by Child and Family Services in the following circumstances [see: Utah Code Ann. [§78A-6-302](#)]:

A. If a child has previously been adjudicated as abused, neglected, or dependent, and a subsequent incident of abuse, neglect, or dependency has occurred involving the same alleged abuser or under similar circumstance as the previous abuse, that fact constitutes prima facie evidence that the child cannot safely remain in the custody of the child's parent.

B. A parent or guardian engages in or threatens a child with unreasonable conduct that could be expected to cause the child to suffer emotional damage.

- 
- C. A child/sibling at risk of being abused or neglected because another child in the same home or with the same caregiver has been or is being abused or neglected.
- D. If a parent or guardian has received actual notice that abuse and neglect by a person known to the parent has occurred, and there is evidence that the parent or guardian failed to protect the child by allowing the child to be in the physical presence of the alleged abuser, that fact constitutes prima facie evidence that the child is at substantial risk of being abused or neglected.
- E. The child is in immediate need of urgent medical care.
- F. A parent or guardian's actions, omissions, or habitual action create an environment that poses a threat to the child's health or safety.
- G. A parent or guardian's action in leaving a child unattended would reasonably pose a threat to the child's health or safety.
- H. The parent, guardian, or an adult residing in the same household as the parent or guardian, has been charged or arrested pursuant to the Clandestine Drug Lab Act or any clandestine laboratory operation was located in the residence or on the property where the child resided. If it is determined that the child is at imminent risk, the Child and Family Services caseworker may remove without a warrant.
- I. There is imminent danger to the physical health or safety of the child and the child's physical health or safety may not be protected without removing the child.
- J. The child's welfare is otherwise endangered.
- A child may not be removed from the child's home or taken into custody solely on the basis of educational neglect, truancy, or failure to comply with a court order to attend school.
- A child removed from the custody of the child's parent or guardian may not be placed or kept in a secure detention facility pending further court proceedings unless the child can be detained based on procedures set forth by the Division of Youth Corrections.
- Child and Family Services caseworkers request a warrant from a court of competent jurisdiction through the Assistant Attorney General's Office.

## 205.2 Actions Required Upon Removal Of A Child

### Major objectives:

Upon removal of a child from the custody of their parent/guardian, the Child and Family Services caseworker will make reasonable efforts to receive and provide appropriate procedural, court, and child information to the parent/guardian and placement and to provide comforting measures for the child through contact, visitation where appropriate, and information.

### **Applicable Law**

Utah Code Ann. [§62A-4a-202.2](#). Notice upon removal of child -- Locating noncustodial parent -- Written statement of procedural rights and preliminary proceedings.

### Practice Guidelines

The Child and Family Services caseworker will take diligent steps to:

- A. Notify both parents, if their whereabouts are known (including a putative father and non-custodial parent), and any legal guardian within 24 hours of removal informing them of the reasons for removal and placement into protective custody.
- B. Give the parents/caregivers the following information:
  1. Notice of Removal and a telephone number where the parents may access further information.
  2. Parents' procedural rights.
  3. Notice of Shelter Hearing, which will be personally served as soon as possible, but no later than one business day after removal of the child from the home. In addition to the parents/caregivers, it will be served to the Guardian ad Litem. It will contain the date, time, and place of the shelter hearing, the name of the child on whose behalf a petition is being brought, and a concise statement regarding the reasons for removal and the allegations.
  4. A Request for Counsel form.
  5. An Affidavit in Support of Request for Appointment of Counsel form.
  6. Information pamphlet entitled, "What Happens When Your Child Is Removed From Your Care" (available in SAFE).
- C. Make reasonable efforts to obtain information essential to the safety and well-being of the child using Form CPS23 and give this information to the provider and the nurse assigned to the case within 24 hours of the child's placement into protective custody. This information should follow the child to their first

assessment. If the child is an infant, include the hospital of birth and the birth weight if this information is available.

D. Audio/videotape investigative interviews initiated by Child and Family Services with children following placement into protective custody and prior to adjudication. [See: Utah Code Ann. [§62A-4a-202.3](#).]

E. Visit the child in their placement by midnight of the second day after the date of removal from the child's parents/guardians. The caseworker will assess the child's adjustment to the placement and their well-being. If the case has been assigned to an ongoing caseworker, the ongoing caseworker or RN assigned to the case can complete the visit for the CPS caseworker. The CPS caseworker is responsible to ensure this visit is completed, and the CPS caseworker and ongoing or RN caseworker need to consult on the visit within 24 hours of the visit.

F. Offer the parents/guardians a visit with the child within three working days of removal, if appropriate.

G. After the first visit in placement is completed, the CPS caseworker will visit the child in their placement once a week until the case is transferred to an ongoing caseworker. Once the case has been transferred, the ongoing caseworker will be responsible for any further visits.

H. Record all of the above actions in SAFE with the date that they were accomplished.

### **205.3 Removal Of A Child From A Home Where Methamphetamine Or Other Illicit Drugs Are Manufactured**

Major objectives:

Children/youth located where there is manufacturing of methamphetamines and/or other illicit drugs will be taken into protective custody where law enforcement determines the child is present and is at risk due to exposure or access to chemicals or other substances used in the production, manufacture, or distribution of these drugs. This may include situations in which the child has been exposed to a contaminated environment.

#### **Applicable Law**

Utah Code Ann. [§62A-4a-105](#). Division responsibilities.

Practice Guidelines

For removal of children from methamphetamine or other illicit drug homes, the following will apply:

- A. Intake receives the information, staffs the referral with a supervisor, and assigns the case as a priority 1, 1R, or 2 to a CPS caseworker.
- B. The CPS caseworker will contact the officer in charge. The officer in charge determines if it is safe for entry. If not safe, the officer in charge will bring the child out to the CPS caseworker.
- C. The CPS caseworker will document, or assure that law enforcement will document, the following, preferably by photographs:
  1. The height of each child.
  2. Safety hazards, such as:
    - a. Counter height where chemicals/drugs are observed;
    - b. Areas where children have access to chemicals/drugs;
    - c. Proximity of food, toys, or clothing to chemicals, needles, etc.
  3. Safety attempts, such as door locks/devices utilized to prevent access to chemicals/drugs.
  4. Play area.
  5. Each room:
    - a. Include walls, floors, ceiling, and objects within each room;
    - b. Describe odors associated with each photograph.
- D. Obtain a checklist of chemicals/drugs at the scene as identified by law enforcement.
- E. Specifically for methamphetamine cases: The CPS caseworker should consult with the officer in charge regarding removal of possessions (including medication) or clothing from the residence. Removal of possessions or clothing from the residence is prohibited except for prescription medications that are clearly labeled as a medication for the child. Any medication taken from the scene should be placed and secured in a plastic bag.
  1. The CPS caseworker will call the prescribing doctor as soon as possible.
  2. The CPS caseworker will inform the physician of the child's exposure to chemicals and placement into protective custody and will request that the medications prescribed be re-prescribed to the child.
  3. The CPS caseworker will request instructions from law enforcement on how to dispose of the exposed medication.

4. The CPS caseworker will ensure that the new prescriptions will be picked up from the pharmacy and delivered to the child.
- F. Specifically for methamphetamine cases: Determine with law enforcement if gross contamination of the child exists. If gross contamination exists, the CPS caseworker will coordinate with law enforcement to ensure that the child is decontaminated. The child will then be transported to a medical facility for evaluation.
- G. The CPS caseworker will notify the foster care provider of the specific circumstances of the removal and any medical needs of the child.
- H. Complete the required paperwork. Assure that the law enforcement officer in charge of the case is given a copy of the Child and Family Services paperwork.

#### 205.4 CPS Caseworker Safety When Exposed To A Methamphetamine Lab

Major objectives:

CPS caseworkers will take actions to reduce potential exposure to chemicals or drugs when intervening to assess the safety of children in situations where methamphetamines may have been manufactured.

#### **Applicable Law**

Utah Code Ann. [§62A-4a-105](#). Division responsibilities.

#### Practice Guidelines

- A. CPS caseworkers responding to situations where exposure to harmful chemicals or drugs may be present will take the following precautions:
  1. Wear clothing that can be laundered and avoid wearing open-toe shoes.
  2. Contact law enforcement if there is a suspicion that methamphetamines are being manufactured in a home.
  3. Immediately leave the home if there is any observation of indicators that an active methamphetamine lab may be in operation, and call 911 for assistance.
  4. Coordinate child safety with the responding officer(s).
- B. CPS caseworkers will use the following appropriate methods to avoid further exposure when intervening in situations that involve exposure to harmful chemicals or drugs:



1. Whenever possible, a child will be wrapped in a clean blanket or, if necessary, changed into clothing that has not been contaminated.
    - a. CPS caseworkers should not take any clothing, blankets, or other items for a child from a home that is suspected to be contaminated.
    - b. Wrapping a child in a clean blanket or dressing them in new clothes obtained from somewhere other than the residence provides adequate protection to the caseworker and vehicle.
  2. When preparing to leave the scene, whenever possible CPS caseworkers will place plastic or another covering on the seat of the car.
  3. CPS caseworkers will take off clothes/shoes worn at the scene and launder the clothing separately in a washing machine using hot water and laundry detergent, then dry the clothing in a clothes dryer.
  4. CPS caseworkers will shower using mild soap, ensuring that the entire body and hair are thoroughly washed.
  5. CPS caseworkers will apply fresh clothing.
    - a. CPS caseworkers should not attempt to clean themselves (or a child) with baby wipes, as it adds moisture and may cause toxins to be absorbed into the skin.
- C. CPS caseworkers should immediately contact their supervisor if there is a suspicion that they have been exposed to methamphetamines.
- D. When a CPS caseworker has been exposed to methamphetamines, regardless of the appearance of symptoms, they should contact their local Human Resource (HR) technician as soon as possible. The HR technician will gather required information from the CPS caseworker and complete the on-line Employer's First Report of Injury or Illness form, which is submitted directly to Workers Compensation Fund on the employee's behalf. The HR technician will then send both an email and a hard copy of the report to the CPS caseworker and the HR specialist assigned to Child and Family Services.
- E. If a CPS caseworker experiences any symptoms from possible exposure (acute exposure: shortness of breath, cough, chest pain, dizziness, lack of coordination, chemical irritation, or burns to skin, eyes, nose, and mouth; less severe exposure: headache, nausea, fatigue, lethargy, and dizziness), they will immediately go to the nearest hospital to seek medical attention.

## 205.5 72-Hour Hold By A Physician

### Major objectives:

A physician has the legal authority to place a child on a 72-hour hold in a medical facility. Upon notification of a 72-hour hold on a child, the CPS caseworker will respond within a priority 1, 1R, or 2 response time frame based upon the protection factors identified in the case. When a physician places a child on a 72-hour hold this constitutes taking the child into protective custody with its accompanying major objectives and procedures.

### **Applicable Law**

Utah Code Ann. [§62A-4a-407](#). Protective custody.

### Practice Guidelines

The CPS caseworker will:

- A. Immediately open an investigation of the circumstances surrounding the removal, coordinate with the medical facility to assume shelter care of the child when discharged, provide the parents with notice of their rights, schedule a 24-hour meeting, coordinate with the assigned Assistant Attorney General, request that a shelter hearing be scheduled within 72 hours of the removal, weekends and holidays excluded, and file a petition, if appropriate.
- B. Obtain all relevant medical information on the child.
- C. Obtain all relevant information on the child's parents or guardians and the circumstances that required the physician to invoke the 72-hour hold.
- D. Provide a copy of the Notice of Removal for maintenance in the child's medical chart
- E. Provide any written instructions for inclusion in the child's medical chart regarding visitation by family members, permission to treat, name of CPS caseworker and a way to contact the caseworker, instructions or arrangements upon discharge, etc.

## 205.6 Shelter Hearing

### Major objectives:

A juvenile court shelter hearing will be held within 72 hours after removal of the child from his or her home, excluding weekends and holidays.

## Applicable Law

Utah Code Ann. [§78A-6-306](#). Shelter hearing.

## Practice Guidelines

- A. If the child is in the protective custody of Child and Family Services, a petition will be filed with the juvenile court, which will include the following information:
1. The reasons why the child was removed from the custody of the parents or guardian including the threats of harm, the child's vulnerabilities, and the protective capacities of the caregiver, or,
  2. The reasons the child would have been removed if the parent had not accessed a domestic violence shelter at the request of Child and Family Services. [See: [Section 204.5](#).]
  3. Reasonable efforts provided to the child and his or her family to prevent removal.
  4. The need, if any, for continued custody.
  5. The available services that could facilitate the return of the child to the custody of his or her parents or guardian.
  6. Whether the child has any relatives who may be able and willing to take temporary custody.
- B. The child will be present at the shelter hearing, unless the Guardian ad Litem determines it would be detrimental for the child. Kin identified as emergency kinship placement will also be present at the shelter hearing, if possible.
- C. In cases where sexual abuse, abandonment, chronic/severe physical abuse, chronic/severe neglect, or medical neglect resulting in death, disability, or serious illness are involved or when the child has been previously removed from the same caregiver, Child and Family Services may recommend to the court that reunification services not be provided to the parents.

## 205.7 24-Hour Multi-Disciplinary Staffing

### Major objectives:

A multi-disciplinary team staffing will be convened within 24 hours after placing a child into protective custody, or requesting a shelter hearing, excluding weekends and holidays. The staffing team members will review the circumstances regarding removal of the child from their home including the threats of harm, the child's vulnerabilities, and the protective capacities of the caregiver, and prepare the testimony and evidence that will be required of Child and Family Services at the shelter hearing in accordance with Utah Code Ann. [§78A-6-306](#). In addition, the CPS caseworker will discuss family strengths, support systems, and possible kinship placements.

**Applicable Law**

Utah Code Ann. [§62A-4a-105](#). Division responsibilities.

**Practice Guidelines**

- A. The multi-disciplinary team staffing will be chaired by Child and Family Services. Members of the team will include, but not be limited to, the following:
1. The CPS caseworker assigned to the case and the CPS caseworker who made the decision to remove the child, if not the same person.
  2. A representative of the school or school district in which the child attends school.
  3. The peace officer who removed the child from the home.
  4. A representative of the appropriate Children's Justice Center if one is established within the county where the child resides.
  5. Local mental health provider or therapist, or a therapist or counselor who is familiar with the child's circumstances, if known.
  6. A member of the Health Care Team.
  7. Any other individual as determined to be appropriate and necessary by the team coordinator and chair, such as Child and Family Services clinical staff, health care provider, Guardian ad Litem, domestic violence specialist, etc.
  8. Consider inviting family members when legal circumstances permit.
- B. Child and Family Services, when possible, will have available for review and consideration the complete CPS and foster care history of the child and the child's parents and siblings.
- C. The team will determine if there are services that may be made available to the family to enable the child to return home.
- D. The team will develop a short-term case plan and assign responsibilities for completion, if the family is present.
- E. The team will consider the possibility of placing the child with a non-custodial parent or in a kinship placement after checking the SAFE database and BCI.
- F. The team will consider whether the facts of the case meet the criteria for not offering reunification. [See: Utah Code Ann. [§78A-6-312](#).]
- G. The team will collect available educational and health information on the child.
- H. The team will determine if the child may be immediately returned to the custody of a parent or legal guardian due to a change in circumstances or new information

3728 that has become available since the decision was made to take protective  
3729 custody. The determination will be made based on an assessment of the threats  
3730 of harm, the child's vulnerabilities, and the protective capacities of the caregiver.  
3731 Notification to the court will still be required even if the child is returned home.  
3732  
3733 [See: Utah Code Ann. [§62A-4a-202.3.](#)]  
3734

## 206 Kinship: Safety And Permanency

### 206.1 Kinship

#### Major objectives:

When a child is placed into protective custody, the CPS caseworker will initiate the kinship process. The CPS caseworker will consider kinship options that include a non-custodial parent, the putative father, and/or other relatives as defined by statute. The CPS caseworker will also consider kinship under ICWA when appropriate. The CPS caseworker will provide information obtained about possible kinship placements to the court at the time of the shelter hearing.

#### **Applicable Law**

Utah Code Ann. [§62A-4a-209](#). Emergency kinship placement.

#### Practice Guidelines

At the shelter hearing the CPS caseworker will request that the child's parents provide names, addresses, and phone numbers of all possible kinship placements within five days. [See: Utah Code Ann. [§78A-6-307](#).]

[See: Utah Code Ann. [§62A-4a-202.3](#) and [§78A-6-306](#).] [See also: [Section 703](#) ICPC (Interstate Compact for the Placement of Children) Major objectives and Procedures, and [Section 500](#) Kinship Major objectives.]

### 206.2 Emergency Kinship Placement

#### Major objectives:

Prior to placing a child in a foster home placement, the CPS caseworker may place a child in a temporary emergency kinship placement (referred to in Practice Guidelines Section 500 as a Preliminary Kinship Placement. Safety, health, and best interest of the child should drive this decision.

#### **Applicable Law**

[See: [Section 206.1](#).]

Refer to Kinship Practice Guidelines for Preliminary Placement in [Section 502](#).

**207 Conflict Of Interest And Related Parties Investigations**  
(PLEASE SEE ADMINISTRATIVE GUIDELINES [SECTION 020.12](#) FOR APPROPRIATE  
PROTOCOL.)

This section provides guidance for Child and Family Services when a child in the custody of the state is alleged to have been the victim of abuse, neglect, or dependency (Conflict of Interest case); or when the case involves a Child and Family Services employee or employee's child (Related Parties case).

**207.1 Investigation Involving A Licensed Out-Of-Home Provider Or  
Child And Family Services Employee**

Major objectives:

- A. Child and Family Services will make every effort to coordinate with a contracted independent CPS agency or if the contractor is unable, with law enforcement agencies for Conflict of Interest investigations when a child in the custody of the state is an alleged victim of child abuse, neglect, or dependency.
- B. Child and Family Services will work with the Office of Services Review Related Parties investigators to investigate reports of child abuse, neglect, or dependency when a Child and Family Services employee, volunteer, or contractor of the Department of Human Services (DHS) has a relationship with the alleged victim, alleged perpetrator, or another person named in the investigation and there is or might appear to be a conflict of interest or impropriety if Child and Family Services performed the investigation.

**Applicable Law**

Utah Code Ann. [§62A-4a-202.6](#). Conflict child protective services investigations –  
Authority of investigators

Practice Guidelines

- A. When the need for a worker from a contracted independent CPS agency has been identified, the following are the procedures:
  - 1. Any time a report is made that a child is abused or neglected while in the custody of Child and Family Services, whether or not the caregiver is the alleged perpetrator, the case will be assigned to the contracted independent CPS agency or worker.
  - 2. The contracted independent CPS caseworker will assess the threats of harm, the child's vulnerabilities, and the protective capacities of the



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- 3812 caregiver, and will then take steps to ensure the safety of any child in the  
3813 home.
- 3814 3. If there is a reasonable basis to believe that the child is in danger or there is  
3815 a substantial threat of danger or harm to the child in his or her home, the  
3816 contracted independent CPS caseworker will advise the region director  
3817 and recommend a change of placement if applicable.
- 3818 4. The region director or region director designee will make the final decision  
3819 regarding a change of placement based on Child and Family Services  
3820 Practice Guidelines and relevant law.
- 3821 5. If the child remains in the parent or caregivers' home during the  
3822 investigation, the contracted independent CPS caseworker will prepare a  
3823 safety plan that identifies the threats of harm, the child's vulnerabilities,  
3824 and the protective capacities of the caregiver and what steps will be taken  
3825 to assure safety. If the child is in out-of-home care, the safety plan will be  
3826 developed with input from the ongoing caseworker, the foster parents, the  
3827 family resource consultant, and the contracted independent CPS  
3828 caseworker.
- 3829 6. Contracted independent CPS caseworkers will report concerns to the  
3830 Office of Licensing.
- 3831
- 3832 B. In the situation in which the contracted independent CPS agency or individual is  
3833 unable to respond to a conflict of interest investigation due to capacity, the  
3834 investigation will be handled by law enforcement or, with the consent of Child  
3835 and Family Services, a CPS investigator employed by the Office of Attorney  
3836 General as provided in Utah Code Ann. [§62A-4a-202.6](#). If neither law  
3837 enforcement nor the Office of Attorney General is willing to provide an  
3838 investigator, Child and Family Services will establish a protocol for handling  
3839 conflict of interest cases.
- 3840 1. A CPS caseworker will be assigned to the case.
- 3841 2. The CPS caseworker will work with law enforcement to obtain all of the  
3842 information needed to complete the investigation per Child and Family  
3843 Services major objectives. If law enforcement refuses to complete any or  
3844 all of the investigation per Child and Family Services major objectives,  
3845 clearly document their refusal in the activity recording.
- 3846 2. The CPS caseworker will request that law enforcement complete the  
3847 interview of any child involved, the foster parents, and collateral sources.  
3848 If law enforcement refuses to complete any or all interviews, the CPS  
3849 caseworker will clearly document the refusal in the activity recording and,  
3850 when possible, complete the interviews.
- 3851 3. The CPS caseworker will consult with law enforcement to determine  
3852 whether the case should be supported.

4. If law enforcement is completing the investigation and the investigation has been open for more than 25 days, the CPS caseworker will consult with law enforcement to determine if an extension is needed.

- C. When allegations of abuse, neglect, or dependency involve a Child and Family Services employee or the child of an employee, the Office of Services Review Related Parties investigators will be assigned to investigate. When the need for a Related Parties investigator has been identified, the following are procedures:
1. When the Related Parties investigator cannot make priority face-to-face contact with the primary victim, the Related Parties investigator may request that a CPS caseworker meet the requirement and assess immediate safety and protection needs.
  2. If it is determined that removal is necessary, the Related Parties investigator will request a CPS caseworker, who will follow Practice Guidelines [Section 205](#) protocol.
  3. If an ongoing case is needed, the Related Parties investigator will notify the region director or designee.

## 207.2 Investigation Involving A Child Care Provider Or Child Care Center

### Major objectives:

CPS will investigate reports of abuse, neglect, or dependency that occur in licensed child care facilities.

### **Applicable Law**

Utah Code Ann. [§62A-4a-409](#). Investigation by division -- Temporary protective custody -- Preremoval interviews of children.

### Practice Guidelines

- A. The Department of Health, Child Care Licensing unit will be contacted by the CPS caseworker.
- B. The CPS caseworker will coordinate with the Department of Health regarding licensing violations.
- C. CPS investigation requirements for child care providers will be the same as for other referrals investigated by Child and Family Services.

## **208 Indian Child Welfare Act (ICWA): Protecting Native American Culture**

### **208.1 Placement Of A Native American Child Into Protective Custody**

#### Major objectives:

A CPS investigation will be completed in compliance with ICWA procedures in order to show deference to the cultural needs of Native American families in Utah. CPS investigations will be completed in compliance with ICWA standards. The CPS caseworker will determine whether the child and family are Native American, complete an investigation that respects the cultural standard of the tribe, and notify the tribe immediately of any legal action taken during the investigation.

With regard to an Native American child who resides on a reservation but is temporarily located off the reservation from his or her parent or Native American custodian, nothing will prevent the emergency removal of a Native American child or the emergency placement of such child in a foster home or institution under applicable state law in order to prevent imminent physical injury or harm to the child. The state authority, official, or agency involved will ensure that the emergency removal or placement terminates immediately when removal or placement is no longer necessary to prevent imminent physical injury or harm to the child.

During the initial contact with all families under investigation, the CPS caseworker will ask if there is any Native American lineage that might make the child eligible for membership in any Native American Tribe.

#### **Applicable Law**

Utah Code Ann. [§62A-4a-105](#). Division responsibilities.

#### Practice Guidelines

Found in [Section 705](#), ICWA.

## 209 Case Transfers And Courtesy Services

This section provides guidance regarding CPS case transfers and courtesy services for another state or agency.

### 209.1 Request For Courtesy Casework Within The State Of Utah

#### Major objectives:

A CPS caseworker may request courtesy assistance for completion of investigative activities on an open CPS case when the child or other individual related to the case is not accessible to the assigned CPS caseworker.

#### **Applicable Law**

Utah Code Ann. [§62A-4a-105](#). Division responsibilities.

#### Practice Guidelines

When a courtesy casework request within the state of Utah is made, the requesting CPS caseworker will complete the following:

- A. Notify their supervisor or designee of the need for courtesy casework. The supervisor of the requesting CPS caseworker will ask the receiving supervisor to assign a courtesy CPS caseworker.
  1. The requesting CPS caseworker will staff with the receiving CPS caseworker to coordinate investigative activities and give as much notice as possible for completion of the courtesy activity.
  2. The requesting CPS caseworker will maintain responsibility for the case and for decisions made on the case, such as determination as to the case finding.
  3. The courtesy caseworker will be assigned as a secondary caseworker to complete the case activity requested.
- B. Within five days of completing the courtesy activity, the receiving CPS caseworker will enter the activity logs in SAFE.

## 209.2 Transfer Of A Case When A Child Has Moved Within The State Of Utah

### Major objectives:

Child and Family Services offices will cooperate to ensure that a CPS investigation is not interrupted and children are not placed in danger when an alleged victim has moved within the State of Utah.

### **Applicable Law**

Utah Code Ann. [§62A-4a-105](#). Division responsibilities.

### Practice Guidelines

The following procedures will be used to determine when a case will be transferred to a different office when it has been determined that the child has moved:

- A. If the child and family moved within the same regional boundaries during the course of the investigation, the CPS caseworker originally assigned to the case will complete all remaining investigative activities and ensure that the case is closed per major objectives. If distance makes continuation and/or completion of the investigation impractical, the case may be transferred to the office where the child resides. The transferring and receiving supervisors must coordinate the transfer.
- B. If the child and the family moved within the state of Utah but outside of the regional boundaries, the case may be transferred to the new region or a request may be made for courtesy casework.
- C. If the child and family moved after the CPS caseworker has made the face-to-face contact with the alleged victim and the whereabouts of the child and family are unknown, the CPS caseworker will make reasonable efforts to locate the family in order to complete the investigation. Once reasonable efforts have been made, the case may be closed as "Unable to Complete Investigation."

## 209.3 Request For Courtesy Casework From Another State

### Major objectives:

CPS may respond to another state's request for courtesy assistance to complete investigative activities when the child or other individual related to the case is in Utah.

### **Applicable Law**

Utah Code Ann. [§62A-4a-105](#). Division responsibilities.

Practice Guidelines

When a CPS caseworker is assigned a request for courtesy casework from another state, the CPS caseworker will keep a record of all activities and will forward another copy of the information to the requesting agency within the time frames identified by the requesting source.

## 209.4 Transfer Of A Case When A Child Has Moved Out Of The State Of Utah

Major objectives:

Child and Family Services will make reasonable efforts to ensure that a CPS investigation is not interrupted when an alleged victim has moved out of the state.

**Applicable Law**

Utah Code Ann. [§62A-4a-105](#). Division responsibilities.

Practice Guidelines

The following steps will be used when the child and family can no longer be located within the state of Utah.

- A. If the child and family move outside the state of Utah before the CPS caseworker is able to make the face-to-face contact with the child and the new location of the child and family is known, the CPS caseworker will contact the state child welfare agency where the family has moved and request courtesy casework. The CPS caseworker may also contact law enforcement in the state where the child has moved to complete investigative interviews. If the state child welfare agency where the family has moved refuses to complete courtesy casework and law enforcement is unable or unwilling to complete interviews, the case will be closed "unable to complete investigation". If the receiving state child welfare agency agrees to complete the courtesy casework, the CPS caseworker will make the appropriate finding based on information from the receiving state. If a finding of supported is made against one or both of the parents/caregivers, upon case closure a Notice of Agency Action will be sent to the address of family in the current state of residence.
- B. If the child and family move outside the state of Utah after the CPS caseworker has made the face-to-face contact with the alleged victim and the whereabouts of the child and family are known, the CPS caseworker will contact the state child welfare agency where the family has moved and will make a request for courtesy casework, providing the information that was obtained in the investigation. The

CPS caseworker may also contact law enforcement in the state where the child has moved to complete investigative interviews. If the state child welfare agency where the family has moved refuses to complete courtesy casework and law enforcement is unable or unwilling to complete the interviews, the case will be closed as "unable to complete investigation." If the receiving state child welfare agency agrees to complete the courtesy casework, the CPS caseworker will make the appropriate finding based on information from the receiving state and casework completed in Utah. If a finding of supported is made against one or both of the parents/caregivers, upon case closure a Notice of Agency Action will be sent to the address of family in the current state of residence.

C. If the child and family move out of the state of Utah after the CPS caseworker has made the face-to-face contact with the alleged victim and the whereabouts of the child and family are unknown, the CPS caseworker will make reasonable efforts to locate the family in order to make a request for courtesy casework from the state child welfare agency where the family now resides. If the receiving state child welfare agency is not able to find the location of the child, the CPS caseworker will close the investigation "unable to complete investigation".

D. If the child and family move out of the state of Utah, the CPS caseworker has not made the face-to-face contact with the alleged victim, and the whereabouts of the child and family are unknown, the CPS caseworker will make reasonable efforts to locate the family in order to make a request for courtesy casework from the state child welfare agency where the family now resides. If the receiving state child welfare agency is not able to find the location of the child, the CPS caseworker will close the investigation "unable to locate".

If the facts of the investigation establish reason to suspect the child is in imminent danger, the CPS caseworker will make appropriate referrals to CPS and law enforcement in the other state and screen the case with the Assistant Attorney General.



## 210 Child Protective Services Records: Confidentiality And Rights To Review

This section provides guidance to CPS caseworkers who must maintain the confidentiality of records and advise clients or others of their rights and restrictions concerning confidential records.

### 210.1 Confidentiality Of CPS Records

#### Major objectives:

Reports of child abuse, neglect, or dependency, as well as any other information in the possession of Child and Family Services, obtained as the result of a report of child abuse, neglect, or dependency, is confidential and may only be made available in accordance with Utah Code Ann. [§62A-4a-412](#).

#### **Applicable Law**

Utah Code Ann. [§62A-4a-412](#). Reports and information confidential.

#### Practice Guidelines

- A. Under Utah Code Ann. [§62A-4a-412](#), reports of child abuse, neglect, or dependency and all information related to the report will only be available to:
1. A police or law enforcement agency investigating a report of known or suspected child abuse, neglect, or dependency.
  2. A physician who reasonably believes that a child may be the subject of abuse, neglect, or dependency.
  3. An agency that has the responsibility or authority to care for, treat, or supervise a child who is the subject of a report.
  4. A contract provider that has a written contract with Child and Family Services to render services to a child who is the subject of a report.
  5. Any subject of the report, the natural parents of the minor, the Office of Guardian ad Litem, and CASA.
  6. A court, upon a finding that access to the records may be necessary for the determination of an issue before it, provided that in a divorce, custody, or related proceeding between private parties the record alone is:
    - a. Limited to objective or undisputed facts that were verified at the time of the investigation;
    - b. Devoid of conclusions drawn by Child and Family Services or any of its social workers on the ultimate issue of whether or not a person's acts or omissions constituted any level of abuse, neglect, or dependency of another person. [See: Utah Code Ann. [§62A-4a-412](#).]

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7. An office of the public prosecutor or its deputies in performing an official duty.
  8. A person authorized by a Children's Justice Center for the purposes described in Utah Code Ann. [§67-5b-102](#).
  9. A person engaged in bona fide research, when approved by the director of Child and Family Services, if the information does not include names and addresses.
  10. The state Office of Education, acting on behalf of itself or on behalf of a school district, for the purpose of evaluating whether an individual should be permitted to obtain or retain a license as an educator or serve as an employee or volunteer in a school, limited to information with substantiated findings involving an alleged sexual offense, an alleged felony or class A misdemeanor drug offense, or any alleged offense against the person under Title 76, Chapter 5, Offenses Against the Person, and with the understanding that the office must provide the subject of a report received under Subsection (1)(k) with an opportunity to respond to the report before making a decision concerning licensure or employment.
  11. Any person identified in the report as an alleged perpetrator or possible perpetrator of child abuse, neglect, or dependency after being advised of the screening prohibition.
- B. No person, unless listed above, may request another person to obtain or release a report or any other information in the possession of Child and Family Services obtained as a result of the report that is available under Subsection (1)(k) to screen for potential perpetrators of child abuse, neglect, or dependency.
- C. A person who requests information knowing that it is a violation of Subsection (2)(e) to do so is subject to the criminal penalty in Subsection (4).
- D. Except as provided in Utah Code Ann. [§62A-4a-1003](#), Child and Family Services and law enforcement officials will ensure the anonymity of the person or persons making the initial report and any others involved in its subsequent investigation.
- E. Any person who willfully permits or aides and abets the release of data or information obtained as a result of this part, in the possession of Child and Family Services, or contained on any part of the management information system, in violation of this part or Utah Code Ann. [§62A-4a-1003](#), is guilty of a class C misdemeanor.
- F. The physician/patient privilege is not grounds for excluding evidence regarding a child's injuries or the cause of those injuries in any proceeding resulting from a report made in good faith pursuant to this part.

## 210.2 Request For CPS Records

### Major objectives:

Individuals or agencies identified by Utah Code Ann. [§62A-4a-412](#) may request a copy of the CPS record, excluding third party information. This copy must first be edited according to GRAMA regulations. Exceptions to GRAMA may be found in Utah Code Ann. [§62A-4a-412](#).

### **Applicable Law**

[See: [Section 210.1](#).]

### Practice Guidelines

- A. The individual making the request will complete a GRAMA request form, a Request for Administrative Hearing form, or provide a request in another written form.
- B. The records will be released in accordance with Utah Code Ann. [§63G-2-202](#).

## 210.3 Process For Internal Agency Review Of Case Findings

### Major objectives:

Internal Agency Reviews of case findings will be conducted when a request is made by an identified perpetrator within the allotted time periods. The review process will be determined per Utah statute and Child and Family Services Practice Guidelines.

### **Applicable Law**

Utah Code Ann. [§62A-4a-1005](#). Supported finding of a severe type of child abuse or neglect -- Notation in Licensing Information System -- Juvenile court petition or notice to alleged perpetrator -- Rights of alleged perpetrator -- Juvenile court finding.  
Utah Code Ann. [§62-4a-1009](#). Notice and opportunity to challenge supported finding in Management Information System -- Right of judicial review.  
Utah Code Ann. [§62-4a-1010](#). Notice and opportunity for court hearing for persons listed in Licensing Information System.

### Practice Guidelines

Based upon applicable law, a perpetrator may request an Internal Agency Review, an Administrative Hearing, or both unless there has been a court determination upholding the Child and Family Services' finding. If the juvenile court has previously made a determination on a Child and Family Services' finding, the requestor will be directed to

pursue an appeal through the juvenile court, if available. The deadlines for pursuing these avenues of review are specified below.

- A. Internal Agency Reviews will be conducted by an Internal Review Panel.
1. The agency Internal Review Panel will be comprised of the following:
    - a. CPS caseworker who completed the investigation, if still employed by Child and Family Services,
    - b. Supervisor at the time of the investigation, if still employed by Child and Family Services,
    - c. Designated Child Welfare Administrator (CWA),
    - d. Assistant Attorney General (AAG), when applicable and/or available,
    - e. Administrative hearing tracker, when applicable and/or needed,
    - f. Any other agency staff the region deems appropriate and/or necessary.
  2. All decisions made by the Internal Review Panel will be documented in a log in the identified CPS case in SAFE. Documentation will include the final decision reached by the panel, as well as how the Internal Review Panel reached their decision.
  3. The decision of the Internal Review Panel will be recorded under the Administrative Hearing Tab of the identified CPS case.
  4. Internal Agency Reviews will be conducted at the written request of a perpetrator who makes a request within the specified time frames, but can also be conducted if the agency determines an Internal Agency Review is necessary.

- B. For all cases in which the perpetrator is listed on the Licensing Information System:

**Findings Prior to May 6, 2002:**

If there has been no prior court finding or plea, the Internal Review Panel can make one of the following determinations:

1. Uphold the finding. The finding will remain Supported or Substantiated in the Management Information System and the Licensing Information System.
  - a. If the identified perpetrator disagrees with the decision of the Internal Review Panel, they will be redirected to pursue recourse through the juvenile court.
  - b. If appropriate, a petition for substantiation should be filed by Child and Family Services with the juvenile court. The petition should be filed within 14 days of the decision of the Internal Review Panel.
2. Uphold the finding in the Management Information System, but remove the perpetrator from the Licensing Information System for the identified

- case. The finding will remain Supported or Substantiated in the Management Information System, but the perpetrator will no longer appear in the Licensing Information System for the identified case. This can be done only when the Internal Review Panel determines the abuse or neglect was not severe or chronic, or there is not enough information to uphold severe/chronic findings.
- a. If the identified perpetrator disagrees with the decision of the Internal Review Panel, they will be directed to pursue recourse through the Office of Administrative Hearings.
  3. Amend the finding to Unsupported.

**Findings After May 6, 2002:**

The requestor has one year from the notification of the Severe/Chronic finding to file a request for an Internal Agency Review or petition the Juvenile Court. If neither of these requests are made within one year, the finding will remain on the Licensing Information System.

1. If the case qualifies as a Severe/Chronic type of abuse or neglect and if the court has previously made a finding on an allegation, the requestor will be redirected to pursue recourse through the juvenile court.
  2. If there has been no prior court finding, the Internal Review Panel may make one of the following determinations:
    - a. Change the finding to Unsupported.
    - b. File a petition for substantiation.
    - c. To uphold the finding in the Management Information System but remove the case from the Licensing Information System on the basis that it does not qualify as Severe/Chronic, and direct the requestor to pursue an Administrative Hearing to amend the finding to Unsupported.
    - d. Maintain the finding in both the Management Information System and the Licensing Information System. Direct the requestor to pursue recourse through the juvenile court.
- C. For ALL cases with a Non-Severe/Non-Chronic finding, the Internal Review Panel can determine one of the following:
1. To uphold the finding, thus requiring the requestor to pursue an amendment through the Office of Administrative Hearings, or
  2. To amend the finding, generally from Supported or Substantiated to Unsupported.
- D. If the requestor disagrees with an Internal Review Panel amended finding, they may request that another review be completed or pursue an Administrative

- 4276           Hearing unless the amended finding was Severe/Chronic, then the requestor  
4277           would need to pursue recourse through the juvenile court.  
4278
- 4279   E.       In addition to the procedures outlined above, if the requestor was a juvenile at  
4280           the time a Supported or Substantiated finding was made against them, they can  
4281           follow the procedures outlined in Utah Code Ann. [§78A-6-1105](#) to make a  
4282           request through the Juvenile Court for their case(s) to be expunged.  
4283
- 4284   F.       Other interested parties involved with a CPS case are not entitled to an Internal  
4285           Agency Review, but can follow the process outlined in Administrative Guidelines  
4286           [Section 010.5](#) if they have concerns regarding the finding made during the course  
4287           of a CPS investigation.  
4288